

**E-FILED
IN COUNTY CLERK'S OFFICE
PIERCE COUNTY, WASHINGTON**

6/2/2020 4:22 PM

Kevin Stock
County Clerk
NO: 20-1-51088

1 **SUPERIOR COURT, PIERCE COUNTY, WASHINGTON**

2
3 **STATE OF WASHINGTON) SW NO: _____**
4)
5 **COUNTY OF PIERCE) SEARCH WARRANT**
6

7
8 **TO ANY PEACE OFFICER IN THE STATE OF WASHINGTON:**

9 Upon the sworn complaint made before me, said complaint or application being attached
10 hereto and incorporated by reference herein, there is probable cause to believe that the crime(s) of
11 Assault in the third-degree RCW 9A.36.031 has been committed, in Pierce county, and that
12 evidence of that/those crime(s); or contraband, the fruits of crime, or things otherwise criminally
13 possessed; or weapons or other things by means of which a crime has been committed or reasonably
14 appears about to be committed; or a person for whose arrest there is probable cause, or who is
15 unlawfully restrained is concealed in or on certain premises, vehicles or persons.
16

17 **YOU ARE COMMANDED to:**

- 18 1. Search, within 10 days of this date, the premises, vehicle or person described as follows:

19 Pierce County Alliance
20 510 Tacoma Avenue South
21 Tacoma, WA 98402
22 (Attention: Phi Rhea, Human Resources Manager)

- 23
24 2. Seize, if located, evidence of the above-listed crimes, including:

- 25 1. Any and all files related to Manuel Elijah Ellis DOB [REDACTED]
26 2. Any and all files for Manuel Elijah Ellis DOB [REDACTED] related to Substance
27 Use Disorder (SUD) and Mental Health, including urinalysis
28 results/documentation.
29

30 Promptly return this warrant to me or the clerk of this court; the return must include an
31 inventory of all property seized.

1 A copy of the warrant and a receipt for the property taken shall be given to the person from
2 whom or from whose premise property is taken. If no person is found in possession, a copy and
3 receipt shall be conspicuously posted at the place where the property is found.

4
5 Date/Time: 06-01-2020 9:48 AM
6

7
8 [] (Check if applicable) The Judge's signature, below, was placed by declarant, at the
9 Judge's direction given by:

10 [] telephone (preserve a recording of the authorization),

11 [x] email (preserve and file the email), or by

12 [] _____ (other reliable method).
13

14
15 Signature: SABRINA AHRENS

16 SUPERIOR/DISTRICT COURT JUDGE

17 Printed Judge's Name: SABRINA AHRENS

1 **SUPERIOR COURT, PIERCE COUNTY, WASHINGTON**

2
3 **STATE OF WASHINGTON) SW NO. _____**
4)
5 **COUNTY OF PIERCE) APPLICATION FOR SEARCH WARRANT**
6

7 **Declaration**

8 I, Detective Franz Helmcke #218/03014, declare that I have personal knowledge of the
9 matters set forth below and that I am competent to testify to the matters stated herein:

10 On the basis of the following, I believe there is probable cause that Manuel Elijah Ellis
11 DOB [REDACTED] committed the crime(s) of Assault in the third-degree RCW 9A.36.031 in Pierce
12 county, and that:

- 13 ☒ Evidence of those crimes; (i.e. evidence of mental health, state of mind)
14 ☐ Contraband, the fruits of a crime, or things otherwise criminally possessed;
15 ☐ Weapons or other things by means of which a crime has been committed or reasonably
16 appears about to be committed;
17 ☐ A person for whose arrest there is probable cause, or who is unlawfully restrained;

18
19 is located in, on, at, or about the following described premises, vehicle or person:
20

21 Pierce County Alliance
22 510 Tacoma Avenue South
23 Tacoma, WA 98402
24 (Attention: Phi Rhea, Human Resources Manager)
25

26 **Affiant**

27 Your affiant is a fully commissioned Deputy Sheriff employed by the Pierce County
28 Sheriff's Department and has been so employed since April 2003. Your affiant is a graduate of
29 the Basic Law Enforcement Academy at the Washington State Criminal Justice Training Center,
30 and has also earned an AAS Degree in Criminal Justice from Green River Community College,

1 along with Law Enforcement Certificates in both Fingerprinting and Forensics Technology from
2 the same educational institution.

3
4 In September 2008, your affiant was promoted to the rank of Detective in the Criminal
5 Investigations Division. As a detective, your affiant has since been assigned to the Domestic
6 Violence Unit, Property Crimes Unit, Special Assault Unit, Robbery/Assault Unit, and
7 Homicide/Missing Persons. As part of my investigative responsibilities, I have written and
8 served numerous search warrants of various types. In 2014 your affiant was appointed to the
9 position of Computer Crimes Investigator/Computer Forensic Examiner and received
10 certification as a Certified Forensic Computer Examiner (CFCE) in September 2014 through the
11 International Association of Computer Investigative Specialists (IACIS). In March 2018, your
12 affiant graduated the Backster School of Lie Detection and was subsequently certified as a
13 polygraph examiner.

14
15 Your affiant has experience investigating Burglaries, Thefts, Frauds, Forgeries,
16 Vandalisms, Harassments, Assaults, Sexual Assaults, Robberies, Death Investigations, Child
17 Exploitation, Computer/Internet crimes, Drug Violations and Traffic Offenses/Collisions. Your
18 affiant has attended training courses in Homicide Investigation, Interview and Interrogation,
19 Internet related investigations, Identity Theft/Financial Investigations, Computer/Digital
20 Evidence forensic processing and Polygraph Examinations. In addition to the formal classes
21 attended, your affiant has also received on the job training during his years in law enforcement
22 from supervisors and other experienced detectives. Additionally, your affiant has experience
23 with some subjects outside of law enforcement which adds to his overall knowledge base.

24
25 **The Investigation**

26 On 03-03-20 at approximately 2320 hours, Tacoma Police Department officers, Matthew
27 Collins and Chris Burbank, were working as a two-man unit in a fully marked Tacoma Police
28 Department patrol SUV. Both officers were wearing a full police uniform. The officers had just
29 cleared an unrelated traffic stop and were traveling westbound on 96th St S when they stopped
30 for a red light at the intersection with Ainsworth Ave S.

1
2 The officers noticed an adult black male, later identified as Manuel Ellis, in the roadway
3 waiving his hands in front of a vehicle that had been waiting to turn from Ainsworth Ave S to
4 westbound 96th St S. Ellis then ran around to the front passenger door and tried to open it. The
5 vehicle was able to complete the turn and sped away. Ellis immediately turned his attention to
6 the police vehicle and ran directly towards it.

7
8 Officer Collins was in the driver's seat and rolled his window down to ask Ellis what he
9 was doing. The officers noticed Ellis was very "sweaty." Ellis reportedly said something like,
10 I'm having a bad day, I have warrants, and I need some help. Ellis was told to step over to the
11 sidewalk and they (the officers) would see what they could do to help him. Ellis then walked
12 around the front of the patrol SUV and went to the front passenger door where Officer Burbank
13 was sitting.

14
15 Officer Burbank rolled the window down and Ellis said something like, I'm really hot; I
16 need to cool down... instead I might just try to punch you in the fucking face. After hearing this,
17 Officer Burbank immediately rolled the window up and Ellis then hit the window 2 or 3 times.

18
19 By this time, Officer Collins had exited the driver's door and was moving around the front
20 of the SUV approaching Ellis. Ellis turned to face Officer Collins with clenched fists, in a
21 fighting stance. Seeing this, Officer Burbank opened his door to "check" Ellis. Officer Burbank
22 then exited the vehicle and locked the doors as Officer Collins and Ellis were now in a physical
23 fight.

24
25 For at least the next three minutes, Officers Collins and Burbank fought with Ellis in an
26 attempt to get him under control and in custody. Ellis was swinging both fists at the officers and
27 did hit them. The officers struck back at Ellis' body, and tried to pin him down. Officer
28 Burbank indicated that their strikes were unable to incapacitate Ellis and he seemed much
29 stronger than them. It was reported that Ellis was screaming and making "growling" sounds
30 while going after the officers. Even when the officers backed off to about a car length, Ellis ran

1 after them swinging his fists, and screaming and growling. A lateral vascular neck restraint
2 (LVNR) was attempted by Officer Collins, but it was not effective at incapacitating Ellis. A
3 taser was deployed several times and was only effective for a few seconds before Ellis went right
4 back to fighting. At one point, the officers got Ellis on his stomach and they were on his back.
5 Officer Burbank said that it seemed like Ellis was doing pushups while both officers were on his
6 back. Eventually, the officers were able to get handcuffs on Ellis, but even then, he continued to
7 roll around and try to buck them off. At some point, Ellis said he could not breath, but because
8 he was still talking, and yelling, the officers did not believe anything was blocking Ellis' airway.

9
10 When backup officers eventually arrived, someone used a set of hobbles to secure Ellis'
11 feet to his handcuffs (behind his back). Ellis was now trying to spit at officers, and someone put
12 a spit sock over his head. While waiting for Tacoma Fire to arrive (or after their arrival), Ellis
13 became unresponsive. CPR was started but was ineffective and Ellis was pronounced deceased
14 at the scene.

15
16 An investigation was begun by the Pierce County Sheriff's Department. A residence
17 located across the street from where the incident occurred (1438 96th St S) was found to have a
18 doorbell video camera. Shortly after the incident, an officer confirmed with a resident that some
19 video of the incident was recorded, but the resident was unable to download it.

20
21 On 03-12-20, I accompanied Det/Sgt Brockway to 1815 102nd St S to speak to the owners
22 of the transitional home where suspect/victim Manuel Ellis was living. Det/Sgt Brockway wrote
23 the following, "I had set up a time to interview Kimberly Mayes the manager. We first spoke
24 with Cedric Armstrong Kimberly's husband who also is a manager. They both agreed to
25 conduct a recorded interview. Cedric started and then Kimberly came into the interview later.
26 The following is a summary of the interview.

27
28 He called the transitional house God's Hands and talked about the second one at 43rd and
29 Pacific. He had lived in this residence for a year and the one on 43rd for 5 years. He said they
30 were trying to get to the point that they were regulated by the State. Manuel had stayed at this

1 residence for 3 months and at the residence on 43rd for 1.5 months. He added that Manuel had
2 been going to Pierce County Alliance (PCA) for UA's drug/alcohol treatment. The U/A's were
3 random. I asked him how Manuel was as a client. He said he was great. He added that Manuel
4 was one of his best tenants. He kept his room clean and did his chores. He mentioned Manuel
5 tackled another tenant who had tried to stab Cedric at the 43rd St residence. Manuel got a cut on
6 his hand from the incident. TPD came out and the tenant was arrested. Manuel also joined their
7 church called Last Days Ministries at 11th/J St. He talked about Manuel being a drummer.
8 He talked about Manuel being on medication that made him sleepwalk. He said sometimes the
9 meds make him restless. He heard from PCA [Pierce County Alliance] that the medication
10 could be for schizophrenia.

11
12 The night of the incident they went to Church until 2130 hours. He cooked food for
13 Manuel when they got him. Manuel's roommate Mendel Everson was present as well. He gave
14 Manuel some paper at 2230 hours. He did not see Manuel or Mendel leave. When he checked
15 their room the next morning the TV was on and the video game chairs were set up. They got a
16 call from Manuel's sister who had talked to the M.E. There was a second access to the
17 downstairs so he had not seen them leave that night. He heard that Mendel [but not directly]
18 was not coming back and did not want his stuff. He mentioned Mendel used meth in the past.
19 Kimberly added details about all the clean U/A's of Manuel and that he was a great role model in
20 class. She talked about the goals he had written on the paper that night. At a few points during
21 the interview they both talked at the same time and it was hard to follow each person's statement.
22 They did not have any issues with Manuel. She was trying to figure out what had occurred with
23 Manuel. She heard from his sister that she listened to a video tape that Manuel said he could
24 not breath twice. I believe she was referring to the surveillance video/audio the Det Helmcke
25 collected from 1438 96th St S [described below]. She mentioned that he likes to go to the 7-11
26 and get snacks at night. She mentioned Brian was one of his good friends but she did not have
27 his number but thought PCA might. She added that Manuel had been clean and sober the entire
28 time. She talked about some of the concerns she had about the case based on what she heard
29 about Manuel saying that he could not breath. She said she could not imagine that he went from

1 the state he was in to beating on a police car. She also talked about the press release in the paper.
2 She added that Manuel had a normal very great week...

3
4 I asked them if the water and donuts found at the scene came from their house. They
5 said no. I asked them what Manuel was recovering from. He used meth in the past. Cedric
6 provided met with the contact information for Manuel's counselors at PCA. She later showed
7 me a cell phone video of Manuel playing the drums in church. She described him as having a
8 beautiful smile, very helpful and gentle. While I was there she called Mendel's mom Michelle
9 to see if she could pass on her number and put her on speaker phone. She declined but I
10 provided Kimberly a business card to pass onto Michelle to have her call me. I wanted to talk
11 with Mendel about that night. I have not heard from her or Mendel. She thought Mendel had a
12 warrant in Thurston County. I explained it was important for us to talk with him. I found
13 Mendel Roi Everson in background with the DOB [REDACTED] Michelle is list as his mom/POC.
14 I did locate a felony warrant and some misdemeanor warrants for his arrest.

15
16 She mentioned that Manuel volunteered for PCA and it was not through the courts. They
17 had known Manuel for about 3-4 months total. She talked again about what she heard about the
18 incident. She thought they should have stunned (tased) him. She thought he had been in a
19 choke hold. Cedric showed us Manuel and Mendel's room. I took a photo of the room and the
20 letter he wrote on my department phone which appeared to be a to do list."

21
22 On 03-13-20, your affiant received a call from Joe White, who lives at 1438 96th St S.
23 White told me that the Vivint doorbell camera is cloud based and only records in 30 second clips.
24 White told me he could download the video clips and email them to me. I requested that White
25 include the last clip recorded just before the incident starts, and several clips subsequent to the
26 end of the altercation.

27
28 White emailed 19 video clips total. The files were automatically named by the service
29 provider, Vivint. The file names include the date and start time of the video (Note: time is stated
30 in Universal Time Code [UTC] which is 8 hours ahead of local time). Example: the first video

1 named "Vivint-Doorbell-2020-Mar-04-065606.mp4" is converted to 03-03-2020 22:56:06 PST.
2 The doorbell camera has a wide angle, fisheye, type lens that somewhat distorts the video at the
3 periphery (in addition to a pixilated resolution). All videos did contain sound.
4

5 Vivint-Doorbell-2020-Mar-04-072147.mp4 (local date/time 03-03-2020 23:21:47 PST):
6 29 second video. Three vehicles are seen stopped on westbound 96th St S. The first vehicle is
7 stopped under a streetlight at the intersection with Ainsworth Ave S and is what appears to be a
8 police SUV. Markings are not visible, but flashing amber lights are illuminating at the rear of
9 the vehicle. The next two vehicles behind the police SUV are a dark, and light-colored sedan. I
10 could hear music playing from what I assume is one of the sedans behind the police SUV.

11 00:03 – short noise like someone yelling

12 00:09 – apparent movement near the front of the police SUV, but unable to see what exactly it is.
13 Additionally, a telephone pole is blocking the view of the area immediately in front of the police
14 SUV

15 00:11 – more non-descript yelling is heard for about 5 seconds

16 00:16 – a female voice is heard yelling something like "Stop. Oh my God, stop hitting him...
17 just arrest him...". It appears that the female is leaning out the drivers' window of the sedan
18 directly behind the police SUV.

19 00:25 – a 'pop' noise is heard, which could be the sound of a taser deployment. The drivers'
20 door of the light-colored sedan opens, and the driver steps out onto the pavement. A male voice
21 is heard yelling, "Hey, ya'll in the road right now." A female voice is then heard saying, "Shut
22 up. You got kids in the car you dumb ass..."

23 From end of video to start of next video there doesn't appear to be any time loss.
24

25 Vivint-Doorbell-2020-Mar-04-072215.mp4 (local date/time 03-03-2020 23:22:15 PST):
26 29 second video. The video begins where the previous video left off. A female voice is heard
27 repeatedly saying, "Shut the fuck up" while a male voice is heard saying something like "Why
28 don't you stop punching him in the face." It appears that it is the two drivers of the sedans that
29 are arguing and yelling at each other and the police. The second driver is still standing at their
30 open door.

1 00:14 – a loud growl or grunt type sound is heard, and someone says what sounds like “Try
2 again”
3 00:16 – a male voice is heard saying, “Go around him [unintelligible]”
4 00:17 – more non-descript unintelligible screaming from what sounds like a male voice that goes
5 on for several seconds
6 00:18 – a person is seen emerging from the back yard of a residence on the north side of 96th St
7 S, three houses to the east of the police SUV. This person walks a little closer and is seen on the
8 sidewalk for several minutes
9 00:25 – the two sedans behind the police SUV begin to pull out and drive around the police SUV
10 on westbound 96th St S.
11 From end of video to start of next video there appears to be about 34 seconds that were not
12 recorded.

13
14 Vivint-Doorbell-2020-Mar-04-072318.mp4 (local date/time 03-03-2020 23:23:18 PST):
15 29 second video. No movement seen when the video begins except for the flashing ambers on
16 the police SUV.
17 00:05 – sirens are now first heard approaching in the distance
18 00:07 – something unintelligible said by someone
19 00:12 – maybe some movement on the ground in front of the police SUV, but again, the quality
20 of the video does not allow any detail
21 00:14 – a male voice is heard saying, “I can’t breathe sir, I can’t breathe.”
22 00:18 – another unintelligible scream
23 00:23 – a male voice is heard asking, “You guys need some help?”
24 00:25 – a male voice responds, “Uh we got somebody coming.”
25 00:27 – sounds like a male voice saying, “Please sir” and another male voice saying “Shut the
26 fuck up man”
27 From end of video to start of next video there appears to be about 11 seconds that were not
28 recorded.

Vivint-Doorbell-2020-Mar-04-072356.mp4 (local date/time 03-03-2020 23:23:56 PST):
29 second video. As the video begins a male voice is heard saying something like, 'We got backup coming.'

00:06 – a vehicle drives by on eastbound 96th St S.

00:14 – male voice is heard saying something unintelligible, and sirens are heard in the distance

00:15 – two vehicles approach the scene from the east on 96th St S and the person who was standing on the sidewalk steps into the roadway to try and direct the traffic around the police SUV

00:22 – male voice is heard saying something, but I could only make out "cop cars" the rest is unintelligible to me

From end of video to start of next video there appears to be about 18 seconds that were not recorded.

Vivint-Doorbell-2020-Mar-04-072438.mp4 (local date/time 03-03-2020 23:24:38 PST):
29 second video. Video opens with a white police Crown Vic patrol car parked behind the police SUV. A door is heard being shut and two officers are seen running in the direction of the police SUV.

00:04 – possible movement seen in front of the police SUV as more sirens approach

00:07 – a voice is heard saying something unintelligible

00:15 – two or three other patrol vehicles arrive to the scene from the east with lights and siren activated

00:19 – more voices heard, but are covered up by the sirens

00:26 – more voices heard, but cannot make out what is said

Vivint-Doorbell-2020-Mar-04-074121.mp4 (local date/time 03-03-2020 23:41:21 PST):
29 second video showing multiple police vehicles on scene, and a resident of the 1438 address (doorbell camera) on the porch watching. Twelve more video clips were provided, but do not appear to contain anything else of value. The last clip provided had a start time of 01:40:08 PST. These video files were also obtained from Vivint by search warrant at a later date.

Based on all the foregoing information, I believe that evidence of the above-listed crime(s) exists at the above-described location, and that there is probable cause to search that location for evidence of the above-listed crimes, including:

1. Any and all files related to Manuel Elijah Ellis DOB [REDACTED]
2. Any and all files for Manuel Elijah Ellis DOB [REDACTED] related to Substance Use Disorder (SUD) and Mental Health, including urinalysis results/documentation.

☒ (Check if applicable) This application was submitted to the issuing Judge using an electronic device that is owned, issued, or maintained by the below-identified criminal justice agency.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signed this 1st day of June 2020, at Tacoma, WA.

Declarant's Signature: _____

OR, if submitted electronically or by telephone:

Declarant's Full Name: Detective Franz Helmcke
Agency Badge/Serial or Personnel #: 218/03014
Agency Name: Pierce County Sheriff's Department

☒ (Check if applicable) The Judge's signature, below, was placed by declarant, at the Judge's direction given by:

- ☐ telephone (preserve a recording of the authorization),
☒ email (preserve and file the email), or by
☐ _____ (other reliable method).

On the 1st day of June 2020, I reviewed and considered the above application, submitted to me under penalty of perjury. 9:48AM

Signature: SABRINA AHRENS
SUPERIOR/DISTRICT COURT JUDGE
Printed Judge's Name: SABRINA AHRENS

Franz Helmcke

From: SearchWarrant
Sent: Monday, June 1, 2020 9:48 AM
To: Franz Helmcke
Subject: RE: warrant for review
Attachments: PCA Search Warrant.pdf

Good morning Det. Helmcke,

I have reviewed the Application and Search Warrant. I do find probable cause. Please affix my signature to each of the attached documents and file a copy of this email with the orders and returns.

Sincerely,

Sabrina Ahrens
Pierce County Superior Court Judge
Department 14
930 Tacoma Avenue South, Room 334
Tacoma, Washington 98402



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From: Franz Helmcke <franz.helmcke@piercecounitywa.gov>
Sent: Monday, June 1, 2020 9:27 AM
To: SearchWarrant <searchwarrant@piercecounitywa.gov>
Subject: warrant for review

Please see attached warrant for review. Please contact me with any questions at 253-377-3585.

Thank you,

Detective Franz Helmcke #218
Pierce County Sheriff's Department
930 Tacoma Ave South
Tacoma WA 98402
Office: 253-798-2351
Fax: 253-798-3376

*All emails, and attachments, sent to and from this Pierce County government address are public records and may be subject to disclosure pursuant to the Public Records Act (RCW 42.56).

[SUPERIOR] COURT, PIERCE COUNTY, WASHINGTON

STATE OF WASHINGTON)
COUNTY OF PIERCE)

SW NO: _____

INVENTORY AND RETURN OF
SEARCH WARRANT

I, the undersigned states as follows:

1. I received a search warrant for the premises, vehicle or person specifically described as follows:

PIERCE COUNTY ALLIANCE

2. On the 1st day of JUNE, 2020, I searched the above-described premises, vehicle or person and found and seized the items listed below in Item 7.

3. Name(s) of person(s) present when the property was seized:

4. The inventory was made in the presence of:

- ☐ The person(s) named in (3) from whose possession the property was taken.
☐ _____

5. Name of person served with a copy or description of place where copy is posted:

PIERCE COUNTY ALLIANCE

6. Place where property is now stored:

PIERCE COUNTY PROPERTY ROOM

7. Property and person(s) seized (Indicate location of property when seized):

RECORDS RELATED TO MANUEL E ELLIS [REDACTED]

Dated: 06-01-2020

B. Brodaway #960821161

Signature of Peace Officer

Printed or Typed Name: Brodaway

Agency and Personnel Number: 161

Dated: 06-01-2020

Det. J. Folien

Signature of Witness

Printed or Typed Name: DET. FOLIEN #226

Admission

Episode Number: 1

Client Name: ELLIS,MANUEL

Sex: Male

Date Of Birth: [REDACTED]

Preadmit/Admission Date: 11/14/2019

Preadmit/Admission Time: 09:42 AM

Program: AOP (Adult Outpatient)

Type Of Admission: First Admission

Attending Practitioner: JOHNSON,STACY (000221)

Social Security Number: [REDACTED]

Demographics

Client's Address - Street: 161 So. 43rd St.

Client's Address - Zipcode: 98408

Client's Address - City: TACOMA

Client's Address - County: PIERCE

Client's Address - State: WA

Client's Cell Phone: 253-533-3020

Communication Preference: Cell Phone

Gender Identity: Male

Sexual Orientation: Straight or heterosexual

Primary Language: ENGLISH

Religion: Christian

Episode 1: AOP (Adult Outpatient) 11/14/2019 - 03/09/2020
Client: Manuel Ellis (000003520)
Submitted 03/09/2020 at 02:38 PM by STACY JOHNSON CDP

Marital Status: (A)SINGLE OR NEVER MARRIED

Client Profile

Effective Date: 11/14/2019

Client Address, Street: 161 So. 43rd St.

Client Address, Zipcode: 98408

Client Address, City: TACOMA

Client Address, County: PIERCE

Client Address, State: WA

Living Situation: (10)PRIVATE RESIDENCE WITHOUT SUPPORT

Client Mobile Phone: 253-533-3020

Communication Preference: Cell Phone

Primary Language: ENGLISH

Hispanic Origin: NOT SPANISH/HISPANIC

Ethnicity: (40)BLACK/AFRICAN AMERICAN

School Attendance: NO

Grade Level: (Q)1ST YR COLLEGE/UNIV (FRESHMAN)

Education: NOT IN EDUCATION/TRAINING

Employment:(C)UNEMPLOYED

Military Service: (1)Client NO

Gender: (2)MALE

Sexual Orientation: (1)HETEROSEXUAL

Marital Status: (A)SINGLE OR NEVER MARRIED

Self Help Count: (4)2 TO 3 TIMES PER WEEK

Needle Used Ever: (4)NEVER

Used Needle Recently (30 Days): No

Smoking Status: (1)CURRENT SMOKER

Presenting Problem

Date of Assessment: 11/14/2019

Assessor's Name: VANHORN, LAURA (000189)

Date of Birth: [REDACTED]

Type of Assessment - Client: Adult

Client Statement of Problem (in client's words, including frequency, duration, severity, etc):

"I completed inpatient at Sea Mar on 7/14/19. I had 90 days clean, but I was still smoking pot, and then I relapsed for a week on meth and caught a charge on 9/22/19. I was in jail for 30 days and then I got out on 10/30/19. What I remember is that I was up for a couple of days and I got put in a fight or flight situation. I got hit in the face with a mug at the KFC and got my tooth knocked out. I got hit in the back of the head and got a TBI, I got hit in the forehead which left a scar on my forehead. I don't remember what happened but I was running down Pacific Ave naked until I was arrested. The only thing that kept me from getting shot by the police was that I was naked and obviously not in my right mind. I was in meth psychosis, and it was employees of the KFC that assaulted me, so I now have a law suit. That week that I relapsed I didn't smoke a lot, I bought a half ounce and I sold most of it. The last time I did meth was the night I got arrested on 9/22/19. I was also smoking weed since I got out of treatment on 7/4/19. I thought it was okay since it's legal but with my mental issues, it's not healthy. I stopped smoking weed not, I haven't smoked it since I was arrested 9/22/19. I would normally smoke a blunt or 2 a day (1-2 grams a day).

Hospital Discharge Related: No

History of Trauma and Abuse:

"My dad died of cancer when I was 3 months old. My mom remarried when I was 2. My step-dad was a pastor and a military man, so he was mildly abusive. He was kind of a weirdo, had me massage his feet and stuff. He never touched me, but he was creepy. Later my sister told me that he touched her. I was sexually abused by my older cousin when I was 7 or 8 and she was 14. I didn't tell anyone until I was 19. Now for me to connect with a woman she has to be white, she has to be submissive, and I think that's all connected. I reached out to her when I got out of treatment, and told her that I forgive her but that it still affected me. She told me that she was abused by my step-dad too."

Advance Directive: None

CURRENT Probation/Parole Status: None

CPS/DCFS Involvement?: None

At-Risk Youth Program?: None

APS Involvement?: None

Is client under supervision by the Department of Corrections? (WAC 388.844.0640 4a): No

The individual is under civil or criminal court ordered mental health or substance use disorder treatment (WAC 388.877.0640 4b): No

Current LRA Status/Conditional Release: No

Draft / Pending Approval / Final: Final

Relationships

Describe Client's Current Living Situation: "I live with family, my sister and her five kids."

Strengths and Supportive Relationships (family, spouse, others):

"My sister is very supportive, she won't even let me smoke weed while I'm living with her. I've lived with her since I got out of jail, before that I had my own apartment. My brother, my mom, and my baby's mom are supportive."

"My strengths are that I'm willing to change, my drive. I can play piano and drums. I'm good at making people laugh."

Family willing to be involved in treatment?: Yes

Psychiatric/Physical Health

Past Outpatient Mental Health Treatment: Yes

Describe Past Outpatient Mental Health Treatment Including Agency/City, Date, and Efficacy:

Just started at Greater Lakes one week ago - "I've had that counselor before, after I got out of Sea Mar. We are working on things that I went thru with my cousin. I'm content with talking about my feelings, but I'm still depressed and I'm

still hearing voices. I know that I need to be on medication. I still hear voices, I don't think I'm crazy. I always thought it was dead relatives. I have heard voices my whole adult life."

Past Inpatient Mental Health Treatment: No

List Previous Diagnoses - include dates:

depression - 2007
bipolar type II - 2019
ADHD - 2000
PTSD - 2019
Schizo-affective disorder - 2019

Client Report of Current Physical Health:

"I was assaulted on 9/22/19 and I got hit in the head and I have a TBI. I am headaches, memory issues, slurred word. I also got a chipped tooth. I see a doctor, he put me on Seroquel to help me sleep. He's a new doctor, that I got when I got out of jail, over in Hilltop. I got shot in my leg in 2015, I shuffle from it."

Currently Prescribed Medication(s): Yes

Does Client Take Medications as Prescribed?: Yes

Describe/Specify Current Medications - List Medications, Length of Use, Prescribing Physician/pharmacy info, allergies etc.:

Seroquel - two weeks, for sleep and bipolar

Current Overall Medication Efficacy: Side effect problems (specify)

Describe Benefits/Problems with Current Medications: "It makes me feel like a robot, but the voices are quieter."

Was Client Prescribed Psychiatric Medications in the past?: Yes

PSYCHIATRIC - Is a Referral Needed?: Yes

PSYCHIATRIC - Priority for Treatment: Yes

Substance Use/Gambling

Are there any alcohol/drug use issues?: Yes

Describe Alcohol/Drug Use:

methamphetamine - first use age 18; started regularly at age 24; used until age 28 (peak use 0.5 gram a day), since then sporadic use, trying to stay clean - prison, DOC. Relapsed in May 2018 after completing DOC, went to inpatient and completed 7/4/19. Was clean until 9/17/19 then relapsed for five days until arrested on 9/22/19. No use since released from jail on 10/30/19. (LUD 9/22/19)

cannabis - first use age 13; started regularly at age 17; typically using 1-2 grams a day. No use since released from jail on 10/30/19. (LUD 9/22/19)

GAIN-SS Completed: Yes

Matrix Completed: Yes

Tobacco: Yes

Describe Tobacco Use:

"I smoke about 1/2 pack a day."

Pathological Gambling: No

Cultural/Spiritual Influences

Client's self-described spiritual and cultural influences:

"I'm a spiritual person. I'm a Christian. I try to pray, I try to listen to uplifting music."

Cultural Consultation Needed?: No

Clinical Formulation

Summary of Essential Problems, Symptoms, Support of Diagnosis and Medical Necessity:

DIM 2: LOC 2.1 Client reports recent assault resulting in a traumatic brain injury which is currently causing headaches, memory issues, and difficulty concentrating. He describes sustaining this injury, as well as a chipped tooth, as a direct result of mental health and substance use issues. Client reports current medication of Seroquel which he has been prescribed and taking for the past two weeks to treat bipolar disorder type 2 and schizoaffective disorder. Client reports

that medication is moderately effective but makes him "feel foggy." Client is currently under the care of a physician. Biomedical issues are stable and able to be addressed concurrently in an outpatient setting. He is in need of motivating strategies to encourage him to address his medical issues as well as education on self-care and nutrition.

DIM 3: LOC 2.1 Client reports diagnoses of bipolar type 2, depression, schizoaffective disorder, PTSD, and ADHD. He states that he has taken medications in the past but struggled to stay compliant to due substance use but that he has been taking Seroquel as prescribed for the past two weeks. He describes the medication as mildly effective aeb his statement, "I still hear voices, but they are quieter." He reports that he started hearing voices in early adulthood. Client reports substance use including methamphetamine and cannabis exacerbate his mental heal issues and that a recent five-day binge on methamphetamine led to a "full psychosis" which resulted in him being assaulted and later arrested. He is unable to recall details of this event. He reports PTSD due to being sexually assaulted by an older cousin when he was 7-years-old, as well as being shot in the leg in 2015 due to "being in the wrong place at the wrong time." Client reports that he recently reengaged in mental health counseling at Greater Lakes and verbalizes a desire to participate in counseling as well as further investigate psychiatric medication management. Client is assessed as being at mild risk of endangering self and others due to recent assault and arrest, and diagnosed mental health issues require LOC 2.1 monitoring to minimize distractions from treatment and recovery.

Summary of Client's Strengths/Resources (include client, family and clinician perspectives):

Client has support from family, stable living environment and accountability at his sister's house. Aware of mental health issues, recently reengaged in counseling and compliant with psychiatric medications. No use since release from jail two weeks ago. Reports commitment to abstain from all substances.

Client's Goals for Services/Desired Outcomes:

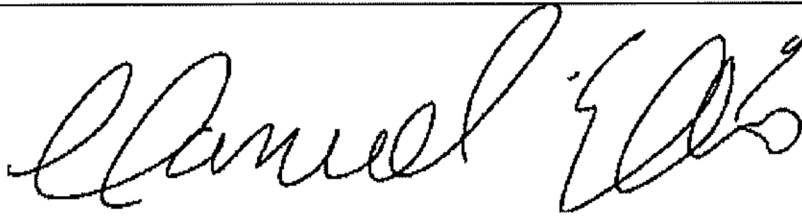
"I want to get some tools to deal with my emotional triggers."

Additional Specialized Assessments Recommended: None needed at this time

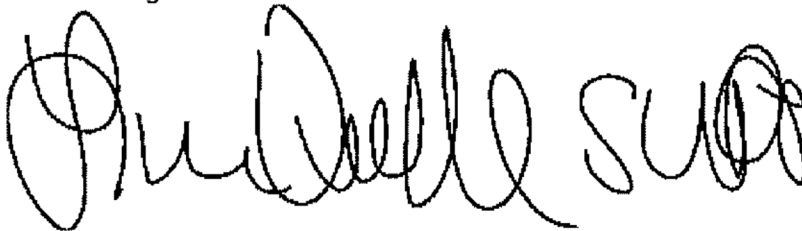
Recommended Course of Treatment:

Continue with mental health and psychiatric medication management

Client Signature:



Clinician Signature:



Risk Assessment

Homicidal Ideation: None

Assault: 180 Days

Threats of Harm: None

Suicidal Ideation: None

Suicidal Attempts: None

Self Harm Gestures: None

Self Neglect/Grave Disability: None

Property Damage: None

Arson/Unsafe Fire Behavior: None

Loss of Placement/Residence due to MH Symptoms: 180 Days

Arrest resulting from MH Symptoms: 180 Days

For any risk behaviors checked above, describe the nature of the incident(s), outcome, date(s) of occurrence, etc:

Assault, arrest due to MH - 9/22/19 while on methamphetamine, reports meth psychosis, arrested

Lost place of residence - "Same incident, I lost my apartment because I went to

jail."

Does client or family feel that the client is at risk for victimization?: No

RISK BEHAVIORS - Referral needed?: No

Referred to Emergency/Crisis Services: No

Crisis Plan Completed: No

High Risk Scan Completed: Yes

Mandatory Report Made: Not Applicable

Chemical Use/Abuse History

Assessment Date: 11/14/2019

Describe history of use including abstinence, relapse history and recovery:

METHAMPHETAMINE

Withdrawal: denies

Tolerance: denies

Attempts at stopping using: "I've tried 6 or 7 times, every time I ran out."

Attempts at controlling use: "I've thought, maybe I can just do it sometimes.
That's how it starts."

Longest period of sobriety and how it was supported: 1 year "Working a program,
will power."

Reason for relapse: "I got off DOC and I thought I could just do it here and
there."

Cravings: "Every time I relapse."

CANNABIS

Withdrawal: irritable, sweats

Tolerance: denies

Attempts at stopping using: "I can quit using anytime, it's never been a problem."

Attempts at controlling use: "I've cut down before."

Longest period of sobriety and how it was supported: "Years, having a good job."

Reason for relapse: "boredom"

Cravings: denies

Drug History

Type of Drugs: Methamphetamine/Speed, Ice

Describe: Used daily from age 24-28; peak use - 0.5 g/day; recent relapse 9/17/19-9/22/19

Age 1st Used: 18

Date of Last Use, if known: 09/22/2019

Frequency Last 30 Days: 0. Never/not used

Frequency Last 6 Months: 1. Only 1-3 times

Method of Administration: Smoking

Drug History

Type of Drugs: Marijuana/Hashish

Describe: typically using 1-2 grams a day

Age 1st Used: 13

Date of Last Use, if known: 09/22/2019

Frequency Last 30 Days: 0. Never/not used

Frequency Last 6 Months: 7. About 2-3 times per day

Method of Administration: Smoking

Treatment History

Type of Drug Treatment: Residential/therapeutic community

How many times have you been treated in your lifetime: 4

Treatment History

Type of Drug Treatment: Drug Treatment Clinic

How many times have you been treated in your lifetime: 3

Alcohol Use

Answer all questions for the past 30 days: None/Not Applicable

Reasons for Reported Use

Physical Pain: Never

Feels sick: Never

Bored or lonely: Sometimes

Sad or depressed: Almost Always

Mad or angry: Sometimes

Scared or afraid: Sometimes

Happy or excited: Often

Increase energy or alertness: Often

Find new excitement: Almost Always

Increase social confidence and courage: Almost Always

Act like other people : Almost Always

Have fun and party with friends: Almost Always

Forget or escape problems: Almost Always

Relax from pressure or stress: Often

Being in certain places or situations: Almost Always

Pressures from others to use them: Never

Having problems he/she feels can't solve: Rarely

Drugs being so easy to get: Often

Need to feel high: Almost Always

Impact of Addictive Behaviors

Alcohol Use: Never

Other Drug Use: Almost Always

Alcohol Use: Never

Other Drug Use: Almost Always

Alcohol Use: Never

Other Drug Use: Often

Alcohol Use: Never

Other Drug Use: Almost Always

Alcohol Use: Never

Other Drugs Use: Never

Alcohol Use: Never

Other Drug Use: Sometimes

Alcohol Use: Never

Other Drug Use: Often

Alcohol Use: Never

Other Drug Use: Often

Describe Police/Legal:

Arrested on 9/22/19 while under the influence, cannot recall details

Current/Recent Treatment

Are you currently in substance abuse treatment?: No

Were you recently in treatment?: No

Use of Self-Help Meetings

Ever attended self-help meetings (AA, NA, OA, etc.)?: Yes

Describe:

"I got to AA meetings, I got to 1 or 2 week. It's helpful sometimes, it depends on my mood. There's a lot of glamorizing going on in those places."

How often find meetings helpful?: Sometimes

Supports and Expectations for Treatment

Who would encourage client to finish treatment and get off drugs?: Spouse/Partner, Mother/Father, Brother/Sister, Other Close Relatives, Friends

What are client's beliefs about their chances of getting off and staying off drugs?: Very good

Other Addictive Behaviors

Other Addictive Behaviors?: No

Summary Assessment

Summary Assessment:

DIM 1: LOC 0 Client reports last use of methamphetamine and cannabis as occurring on 9/22/19. He reports that he was incarcerated from 9/22/19 until 10/30/19 and denies any substance use since his release. Client reports history of mild withdrawal symptoms for cannabis as irritability and sweats. No signs of intoxication or withdrawal were observed; no symptoms reported. No services needed in this dimension.

DIM 4: LOC 1.0 Client reports a history of legal issues related to substance use, the most recent of which was a 9/22/19 arrest resulting in pending Robbery 2 charge at which time client was under the influence which he states exacerbated his existing mental health issues. He reports a history of multiple treatment attempts, the most recent of which was successful completion of inpatient at Sea Mar which client reports was motivated by internal desire to change. Client reports internal and external motivation to seek treatment and change his use, to address legal issues as well as to improve overall mental health. Client expresses willingness to participate in treatment planning and to attend all scheduled activities, including mental health treatment and sober support meetings, both of

which he states that he is already engaged in. Client is in need of scheduled contact and motivational strategies to address potential ambivalence and strengthen motivation.

DIM 5: LOC 1.0 Client report that he has been using methamphetamine regularly since age 24, peak use of 0.5 grams per day via smoke, five years ago at age 28. He reports that since this time he has been clean "on an off" with his longest period of sobriety being one year, and his most recent being 90 days from June 2019 until September 2019 when he relapsed for 5 days. Client's last use date is 9/22/19. He reports that he primarily struggles with internal triggers related to mental health issues and coping with trauma and negative emotions. He reports history of daily cannabis use, using up 1 to 2 grams a day. Client reports using cannabis to address cravings for methamphetamine. His last use date is 9/22/19. Client appears to have good insight to his personal triggers and is in need of relapse prevention education to learn and practice skills necessary to cope with his triggers.

DIM 6: LOC 1.0 Client reports that he has been staying with his sister since his release from jail on 9/22/19 and that prior to this he had his own apartment which he lost due to his arrest and incarceration. He reports that his sister's house is a supportive environment and that she has a zero tolerance policy for any substance use. He states that he has been attending "1 or 2" sober support meetings per week and has friends in recovery. Client is in need of the accountability and support provided in LOC 1.0 while he addresses his pending legal issues and strengthens his sober support system.

Recommendations/Plans

Recommendations/Plans:

Client is recommended to enter into and complete ASAM LOC 1.0 Outpatient treatment services.

Draft/Final: Final

Client Signature:

A handwritten signature in black ink, appearing to read "Manuel Ellis". The signature is written in a cursive, flowing style.

Document Routing

Status: Final

Approvers:

SAMI FRENCH-Supervisor (Accepted)

Date Created: 11/14/2019 at 12:43 PM PST
Form Name: ASAM Placement Criteria
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Intake Assessment

Assessment Date: 11/14/2019

Assessor: VANHORN,LAURA (000189)

Tool Indicated: LEVEL 1

Clinically Recommended: LEVEL 1

Clinical Overview:

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Form Name: ASAM Placement Criteria
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

being assaulted and later arrested. He is unable to recall details of this event. He reports PTSD due to being sexually assaulted by an older cousin when he was 7-years-old, as well as being shot in the leg in 2015 due to "being in the wrong place at the wrong time." Client reports that he recently reengaged in mental health counseling at Greater Lakes and verbalizes a desire to participate in counseling as well as further investigate psychiatric medication management. Client is assessed as being at mild risk of endangering self and others due to recent assault and arrest, and diagnosed mental health issues require LOC 2.1 monitoring to minimize distractions from treatment and recovery.

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Form Name: ASAM Placement Criteria
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

to his arrest and incarceration. He reports that his sister's house is a supportive environment and that she has a zero tolerance policy for any substance use. He states that he has been attending "1 or 2" sober support meetings per week and has friends in recovery. Client is in need of the accountability and support provided in LOC 1.0 while he addresses his pending legal issues and strengthens his sober support system.

Client was diagnosed with SEVERE METHAMPHETAMINE USE DISORDER (F15.20) and MODERATE CANNABIS USE DISORDER (F12.20).

Override (Are there circumstances that would override the AS: No

Dimension 1 Acute Intoxication/Withdrawal Potential: (None) No Detoxification services indicated

Dimension 2 Biomedical Conditions/Complications: (Level 2.1) Intensive Outpatient Services

Dimension 3 Emotional/Behavioral/Cognitive Conditions: (Level 2.1) Intensive Outpatient Services

Dimension 4 Readiness to Change: (Level 1) Outpatient Services

Dimension 5 Relapse/Continued Use Potential: (Level 1) Outpatient Services

Dimension 6 Recovery Environment: (Level 1) Outpatient Services

Placement Level: (C) LEVEL 1

Draft/Final: Final

Electronically Signed by: LAURA VANHORN CDPT on 11/14/2019 at 12:43 PM PST Author

Electronically Signed by: SAMI FRENCH CDP, MA on 11/14/2019 at 01:56 PM PST Supervisor

ACES

Date: 11/14/2019

Assessment Type: Client

Did a parent or other adult in the household often or very...Swear at you, insult you, put you down, or humiliate you? Or act in a way that made you afraid that you might be physic: 0

Did a parent or other adult in the household often or very often...Push, grab, slap, or throw something at you? Or ever hit you so hard that you had marks or were injured?: 0

Did an adult or person at least 5 years older than you ever...Touch or fondle you or have you touch their body in a sexual way? Or attempt or actually have oral, anal or vaginal in: 1

Did you often or very often feel that...No one in your family loved you or thought you were important or special? Or your family didn't look out for each other, feel close to each : 0

Did you often or very often feel that...You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? Or your parents were too drunk or high to take care: 0

Were your parents ever separated or divorced?: 0

Was your mother or stepmother often or very often pushed, grabbed, slapped, or had something thrown at her? Or sometimes, often, or very often kicked, bitten, hit with a fist or hi: 0

Did you live with anyone who was a problem drinker or who alcoholic or who used street drugs?: 0

Was a household member depressed or mentally ill or did a household member attempt suicide?: 0

Did a household member go to prison?: 0

Total Score: 1

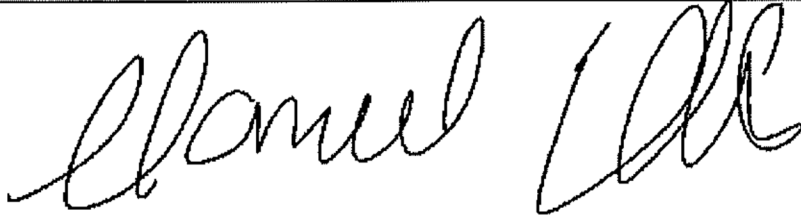
Status: Final

Client Signature:

Episode 1: AOP (Adult Outpatient) 11/14/2019 - 03/09/2020

Client: Manuel Ellis (000003520)

Submitted 11/14/2019 at 10:31 AM by LAURA VANHORN CDPT

A handwritten signature in black ink, appearing to read "Manuel Ellis". The signature is written in a cursive, flowing style.

Document Routing

Status: Final

Approvers:

SAMI FRENCH-Supervisor (Accepted)



DIVISION OF BEHAVIORAL HEALTH AND RECOVERY (DBHR)

**DBHR Target Data Elements
Gain Short Screening Setup**

ADMINISTRATION TIME 10:00	STAFF IDENTIFICATION VAN HORN	DATE 11/14/19	AGENCY NUMBER 019100																														
SECTION I CLIENT IDENTIFICATION																																	
1. LAST NAME Ellis	2. FIRST NAME Manuel	MIDDLE NAME Elijah	4. OTHER LAST NAME																														
5. GENDER <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	6. DATE OF BIRTH [REDACTED]	7. SOCIAL SECURITY NUMBER [REDACTED]	8. WASHINGTON DRIVER'S LICENSE OR ID NUMBER																														
9. WHICH RACE/ETHNICITY GROUP WOULD YOU IDENTIFY YOURSELF WITH (CHECK A MAXIMUM OF FOUR THAT APPLY) <table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> Asian Indian</td> <td><input type="checkbox"/> Middle Eastern</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Black/African American</td> <td><input type="checkbox"/> Native American</td> <td><input type="checkbox"/> Non - Federal Tribe</td> </tr> <tr> <td><input type="checkbox"/> Cambodian</td> <td><input type="checkbox"/> Other Asian</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Chinese</td> <td><input type="checkbox"/> Other Pacific Islander</td> <td>Tribal Code (No. _____)</td> </tr> <tr> <td><input type="checkbox"/> Filipino</td> <td><input type="checkbox"/> Other Race</td> <td>1) _____</td> </tr> <tr> <td><input type="checkbox"/> Guamanian</td> <td><input type="checkbox"/> Refused to Answer</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Hawaiian (Native)</td> <td><input type="checkbox"/> Samoan</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Japanese</td> <td><input type="checkbox"/> Thai</td> <td>Tribal Code (No. _____)</td> </tr> <tr> <td><input type="checkbox"/> Korean</td> <td><input type="checkbox"/> Vietnamese</td> <td>2) _____</td> </tr> <tr> <td><input type="checkbox"/> Laotian</td> <td><input type="checkbox"/> White/European American</td> <td></td> </tr> </table>				<input type="checkbox"/> Asian Indian	<input type="checkbox"/> Middle Eastern		<input checked="" type="checkbox"/> Black/African American	<input type="checkbox"/> Native American	<input type="checkbox"/> Non - Federal Tribe	<input type="checkbox"/> Cambodian	<input type="checkbox"/> Other Asian		<input type="checkbox"/> Chinese	<input type="checkbox"/> Other Pacific Islander	Tribal Code (No. _____)	<input type="checkbox"/> Filipino	<input type="checkbox"/> Other Race	1) _____	<input type="checkbox"/> Guamanian	<input type="checkbox"/> Refused to Answer		<input type="checkbox"/> Hawaiian (Native)	<input type="checkbox"/> Samoan		<input type="checkbox"/> Japanese	<input type="checkbox"/> Thai	Tribal Code (No. _____)	<input type="checkbox"/> Korean	<input type="checkbox"/> Vietnamese	2) _____	<input type="checkbox"/> Laotian	<input type="checkbox"/> White/European American	
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Global Appraisal of Individual Needs-Short Screener (GAIN-SS)																																	
<i>The following questions are about common psychological, behavioral or personal problems. These problems are considered significant when you have them for two or more weeks, when they keep coming back, when they keep you from meeting your responsibilities, or when they make you feel like you can't go on. Please answer the questions Yes or No.</i>																																	
Mental Health Internalizing Behaviors (IDScr 1): During the past 12 months, have you had significant problems <table style="width:100%; border: none;"> <tr> <td>a. with feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>b. with sleep trouble, such as bad dreams, sleeping restlessly or falling sleep during the day?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>c. with feeling very anxious, nervous, tense, scared, panicked or like something bad was going to happen?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>d. when something reminded you of the past, you became very distressed and upset?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>e. with thinking about ending your life or committing suicide?</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> </table>				a. with feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	b. with sleep trouble, such as bad dreams, sleeping restlessly or falling sleep during the day?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	c. with feeling very anxious, nervous, tense, scared, panicked or like something bad was going to happen?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	d. when something reminded you of the past, you became very distressed and upset?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	e. with thinking about ending your life or committing suicide?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No															
a. with feeling very trapped, lonely, sad, blue, depressed, or hopeless about the future?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
b. with sleep trouble, such as bad dreams, sleeping restlessly or falling sleep during the day?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
c. with feeling very anxious, nervous, tense, scared, panicked or like something bad was going to happen?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
d. when something reminded you of the past, you became very distressed and upset?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
e. with thinking about ending your life or committing suicide?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No																															
Each yes answer is "1" point IDScr Sub-scale Score (0 to 5) 4																																	
Mental Health Externalizing Behaviors (EDScr 2): During the past 12 months, did you do the following things two or more times? <table style="width:100%; border: none;"> <tr> <td>a. Lie or con to get things you wanted or to avoid having to do something?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>b. Have a hard time paying attention at school, work or home?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>c. Have a hard time listening to instructions at school, work or home?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>d. Been a bully or threatened other people?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>e. Start fights with other people?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> </table>				a. Lie or con to get things you wanted or to avoid having to do something?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	b. Have a hard time paying attention at school, work or home?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	c. Have a hard time listening to instructions at school, work or home?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	d. Been a bully or threatened other people?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	e. Start fights with other people?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No															
a. Lie or con to get things you wanted or to avoid having to do something?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
b. Have a hard time paying attention at school, work or home?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
c. Have a hard time listening to instructions at school, work or home?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
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e. Start fights with other people?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
Each yes answer is "1" point EDScr Sub-scale Score (0 to 5) 5																																	
Substance Abuse Screen (SDScr 3): During the past 12 months, did.... <table style="width:100%; border: none;"> <tr> <td>a. you use alcohol or drugs weekly?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>b. you spend a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs (high, sick)?</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>c. you keep using alcohol or drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input type="checkbox"/> No</td> </tr> <tr> <td>d. your use of alcohol or drugs cause you to give up, reduce or have problems at important activities at work, school, home or social events?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>e. you have withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or use any alcohol or drugs to stop being sick or avoid withdrawal problems?</td> <td><input checked="" type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> </table>				a. you use alcohol or drugs weekly?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	b. you spend a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs (high, sick)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	c. you keep using alcohol or drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	d. your use of alcohol or drugs cause you to give up, reduce or have problems at important activities at work, school, home or social events?	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	e. you have withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or use any alcohol or drugs to stop being sick or avoid withdrawal problems?	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No															
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b. you spend a lot of time either getting alcohol or drugs, using alcohol or drugs, or feeling the effects of alcohol or drugs (high, sick)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No																															
c. you keep using alcohol or drugs even though it was causing social problems, leading to fights, or getting you into trouble with other people?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No																															
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e. you have withdrawal problems from alcohol or drugs like shaking hands, throwing up, having trouble sitting still or sleeping, or use any alcohol or drugs to stop being sick or avoid withdrawal problems?	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No																															

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Legal Addendum

Assessment Date: 11/14/2019

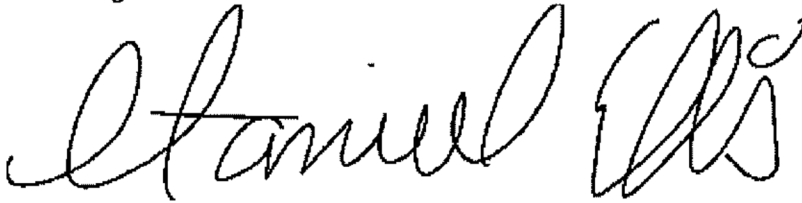
Total Number of Arrests in the Last 30 Days: 0

Total Number of Arrests in their Lifetime: 20

Within the Last 5 Years, Total Number of DUIs: 0

Within the Last 5 Years, Total Number of MIPs: 0

Client Signature:

A handwritten signature in black ink, appearing to read "Manuel Ellis". The signature is fluid and cursive, with the first name "Manuel" written in a larger, more prominent script than the last name "Ellis".

Draft/Final: Final

Legal Involvement

Legal Charges: DUI

Date Charged: 2010

Designation: Adult

Status: Resolved

Outcome: Misdemeanor

Comments:

Reduced to negligent driving

Legal Involvement

Legal Charges: ROBBERY IN THE SECOND DEGREE

Date Charged: 09/22/2019

Designation: Adult

Status: Pending

Outcome: Continued

Legal Involvement

Legal Charges: POSSESSING STOLEN PROPERTY IN THE SECOND DEGREE

Date Charged: 09/23/2014

Designation: Adult

Status: Resolved

Outcome: Felony

Years Served: 30 days

Comments:

PLED GLTY EQUIV FEL - IDENTITY THEFT IN THE SECOND DEGREE
Was on DOC

Legal Involvement

Legal Charges: IDENTITY THEFT IN THE SECOND DEGREE

Date Charged: 06/09/2015

Designation: Adult

Status: Resolved

Outcome: Felony

Comments:

PLED GLTY EQUIV FEL - CRIMINAL IMPERSONATION IN THE FIRST DEGREE
Was On DOC

Legal Involvement

Legal Charges: UNLAWFUL POSSESSION OF A CONTROLLED SUBSTANCE

Date Charged: 06/09/2015

Designation: Adult

Status: Resolved

Outcome: Felony

Years Served: mos

Comments:

PLED GLTY EQUIV FEL - ATTEMPTED UNLAWFUL POSSESSION OF A
CONTROLLED SUBSTANCE

Legal Involvement

Legal Charges: IDENTITY THEFT IN THE SECOND DEGREE

Date Charged: 06/16/2017

Designation: Adult

Status: Resolved

Years Served: 4 mos

Comments:

Mental Health Court - did not complete

Document Routing

Status: Final

Approvers:

SAMI FRENCH-Supervisor (Accepted)

Diagnosis

Date of Diagnosis: 03/09/2020
Time of Diagnosis: 02:36 PM
Type of Diagnosis: Discharge

Primary Diagnosis: Amphetamine use disorder, severe (F15.20) (Amphetamine-type substance use disorder, severe)

Status: Active
Bill Order: 1
Rank: Primary
Classification: Substance Abuse
Diagnosing Clinician: JOHNSON,STACY (000221)
Add To Problem List: Yes

Diagnosis: Moderate cannabis use disorder (F12.20) (Cannabis use disorder, moderate)

Status: Active
Bill Order: 2
Present On Admission Indicator: Blank (Unreported)
Classification: Substance Abuse
Diagnosing Clinician: JOHNSON,STACY (000221)
Add To Problem List: Yes

Additional Diagnosis Information

SS Diagnosis Dict 11 Value: (Y)UNKNOWN
SS Diagnosis Dict 1 Value: (99)NOT APPLICABLE
SS Diagnosis Dict 2 Value: NOT APPLICABLE
SS Diagnosis Dict 3 Value: NOT APPLICABLE

Diagnosis

Date of Diagnosis: 11/14/2019

Time of Diagnosis: 11:58 AM

Type of Diagnosis: Admission

Primary Diagnosis: Severe methamphetamine use disorder (F15.20) (Other or unspecified stimulant use disorder, severe)

Status: Active

Bill Order: 1

Rank: Primary

Present On Admission Indicator: Yes

Classification: Substance Abuse

Diagnosing Clinician: VANHORN, LAURA (000189)

Remarks: The substance is often taken in larger amounts or over a longer period than was intended. Craving, or a strong desire or urge to use the substance. Recurrent use resulting in a failure to fulfill major role obligations at work, school, or home. Continued use despite having persistent or recurrent social or interpersonal problems caused by or exacerbated by the effects of the substance. Important social, occupational, or recreational activities are given up or reduced because of use: Use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance(s)

Diagnosis: Moderate cannabis use disorder (F12.20) (Cannabis use disorder, moderate)

Status: Active

Bill Order: 2

Rank: Secondary

Present On Admission Indicator: Yes

Classification: Substance Abuse

Diagnosing Clinician: VANHORN, LAURA (000189)

Remarks: A great deal of time is spent in activities necessary to obtain, use, or recover from the effects of the substance Continued use despite having persistent or recurrent social or interpersonal problems caused by or exacerbated by the effects of the substance. Use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance(s) A need for markedly increased amounts of the substance to achieve intoxication or the desired effect.

Additional Diagnosis Information

SS Diagnosis Dict 11 Value: (Z)NONE - NO DISABILITY

SS Diagnosis Dict 1 Value: (99)NOT APPLICABLE

SS Diagnosis Dict 2 Value: NOT APPLICABLE

SS Diagnosis Dict 3 Value: NOT APPLICABLE

Individual Service Plan

Plan Date: 11/14/2019

Plan Type: Initial

Next Review Date: 12/12/2019

Last Updated: 11/14/2019

Last Updated By: LAURA VANHORN

Treatment Plan Status: Final

Strengths/Abilities/Preferences:

S: driven
N: ORCA card
A: playing drums and piano
P: mental health and outpatient

Problems

Problem Code: Specify Other

Other:

medical issues

Status (Problem List): Resolved

Client/Patient Description of Problem:

"I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Date Opened: 11/14/2019

Status: Active

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Goals

Client/Patient Description of Goal:

"To get the help I need to get better and advocate for my health."

Date Opened: 11/14/2019

Status: Active

Target Date: 01/13/2020

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Objectives

SMART Objective:

"to think better and feel better."

Date Opened: 11/14/2019

Status: Active

Target Date: 01/13/2020

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Interventions

Intervention:

"I will attend my 12/5/19 appointment with my primary care provider."

Date Opened: 11/14/2019

Status: Active

Targeted Date: 12/05/2019

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Interventions

Intervention:

"I will make a list of questions and concerns that I have regarding my medical issues."

Date Opened: 11/14/2019

Status: Active

Targeted Date: 12/05/2019

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Interventions

Intervention:

"I will discuss my concerns with my physician at my appointment."

Date Opened: 11/14/2019

Status: Active

Targeted Date: 12/05/2019

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Interventions

Intervention:

"I will attend any recommended follow-up appointments."

Date Opened: 11/14/2019

Status: Active

Targeted Date: 01/13/2020

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Interventions

Intervention:

"I will keep my counselor informed of my progress."

Date Opened: 11/14/2019

Status: Active

Targeted Date: 01/13/2020

Staff Assigning: VANHORN,LAURA (000189)

Predefined: No

Participation

Role: Client/Patient

Name: Manuel Ellis

Plan Author: No

Notification Required: No

Client Offered Plan?: Yes

Client participated in development of plan?:



Participation

Role: Staff

Name: VANHORN, LAURA

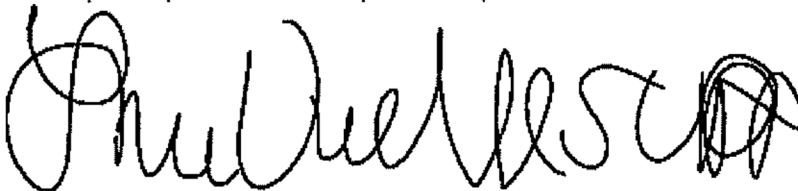
Select Staff Member: VANHORN, LAURA (000189)

Plan Author: Yes

Notification Required: No

Client Offered Plan?: Yes

Client participated in development of plan?:



Document Routing

Status: Final

Approvers:

SAMI FRENCH-Supervisor (Accepted)

Individual Service Plan

Plan Date: 01/16/2020

Plan Type: New

Next Review Date: 02/13/2020

Last Updated: 01/16/2020

Last Updated By: JOAN C SPENCER

Treatment Plan Status: Final

Strengths/Abilities/Preferences:

Strengths: "My resilience"
Needs: "To get my tooth fix"
Abilities: "Playing the drums"
Preferences: "Watching TV"

What cultural considerations do we need to address within this individual service plan?:

none

Problems

Problem Code: Specify Other

Other:

medical issues

Status (Problem List): Resolved

Client/Patient Description of Problem:

"I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Date Opened: 11/14/2019

Status: Resolved

Date Resolved: 01/16/2020

Predefined: Yes

Goals

Client/Patient Description of Goal:

"To get the help I need to get better and advocate for my health."

Date Opened: 11/14/2019

Status: Resolved

Target Date: 01/13/2020

Date Resolved: 01/16/2020

Predefined: Yes

Objectives

SMART Objective:

"to think better and feel better."

Date Opened: 11/14/2019

Status: Resolved

Target Date: 01/13/2020

Date Resolved: 01/16/2020

Predefined: Yes

Interventions

Intervention:

"I will attend my 12/5/19 appointment with my primary care

provider."

Date Opened: 11/14/2019

Status: Resolved

Targeted Date: 12/05/2019

Date Resolved: 01/16/2020

Predefined: No

Interventions

Intervention:

"I will make a list of questions and concerns that I have regarding my medical issues."

Date Opened: 11/14/2019

Status: Resolved

Targeted Date: 12/05/2019

Date Resolved: 01/16/2020

Predefined: No

Interventions

Intervention:

"I will discuss my concerns with my physician at my appointment."

Date Opened: 11/14/2019

Status: Resolved

Targeted Date: 12/05/2019

Date Resolved: 01/16/2020

Predefined: No

Interventions

Intervention:

"I will attend any recommended follow-up appointments."

Date Opened: 11/14/2019

Status: Resolved

Targeted Date: 01/13/2020

Date Resolved: 01/16/2020

Predefined: No

Interventions

Intervention:

"I will keep my counselor informed of my progress."

Date Opened: 11/14/2019

Status: Resolved

Targeted Date: 01/13/2020

Date Resolved: 01/16/2020

Predefined: No

Problems

Problem Code: Specify Other

Other:

Time line

Status (Problem List): Active

Client/Patient Description of Problem:

"I need to learn more about my usage and my mental health by making a time line"

Date Opened: 01/16/2020

Status: Active

Staff Assigning: SPENCER,JOAN C (000116)

Predefined: No

Goals

Client/Patient Description of Goal:

"I will know about my usage and my mental health and if there is a connection by doing a time line."

Date Opened: 01/16/2020

Status: Active

Target Date: 03/15/2020

Staff Assigning: SPENCER,JOAN C (000116)

Predefined: No

Objectives

SMART Objective:

"I will make a time line so I understand if there is a connection between my using and my mental health."

Date Opened: 01/16/2020

Status: Active

Target Date: 03/15/2020

Staff Assigning: SPENCER,JOAN C (000116)

Predefined: No

Interventions

Intervention:

"I will make a graph of my use of each drug I have used and the amounts, at the same time think about how I was feeling.

Date Opened: 01/16/2020

Status: Active

Targeted Date: 03/15/2020

Staff Assigning: SPENCER,JOAN C (000116)

Predefined: No

Interventions

Intervention:

"I will make a graph over the drug graph on my mental

health and when it was pronounced or stable."

Date Opened: 01/16/2020

Status: Active

Targeted Date: 03/15/2020

Staff Assigning: SPENCER,JOAN C (000116)

Predefined: No

Interventions

Intervention:

"I will discuss with my counselor what I found out about myself, my use, and my mental health."

Date Opened: 01/16/2020

Status: Active

Targeted Date: 03/15/2020

Staff Assigning: SPENCER,JOAN C (000116)

Predefined: No

Participation

Role: Client/Patient

Name: Manuel Ellis

Plan Author: No

Notification Required: No

Client Offered Plan?: Yes

Signature:



Participation

Role: Staff

Name: SPENCER,JOAN C

Select Staff Member: SPENCER,JOAN C (000116)

Plan Author: Yes

Signature:



Document Routing

Status: Final

Approvers:

COMMUNITY
HEALTH
Care

MEDICAL • DENTAL • PHARMACY

Hilltop Regional Health Care
Phone: (253) 441-4742
Fax: (253) 442-8680

Spanaway Family Medical Clinic
Phone: (253) 847-2304
Fax: (253) 847-8857

Lakewood Family Medical Clinic
Phone: (253) 589-7030
Fax: (253) 284-9314

Tanbara Family Health Center
Phone: (253) 471-4553
Fax: (253) 474-5395

Parkland Family Medical Clinic
Phone: (253) 536-2020
Fax: (253) 536-5327

Urgent Care Clinic
Phone: (253) 442-8690
Fax: (253) 442-8623

CHC Hilltop FP Residency

1202 Martin Luther King Jr. Way
Tacoma, WA 98405-3929
Phone: (253)441-4742
Fax: (253)442-8680

February 18, 2020

Re: Manuel Ellis

DOB: [REDACTED]

To Whom It May Concern:

Please excuse Mr. Ellis from work or school today

Sincerely,



Bryan Rhodes DO
Community Health Care Provider

Treatment/Discharge Summary

Summary Date: 03/09/2020

Summary Time: 02:36 PM

Summary Type: Substance Abuse

Summary Status: Final

Review Type: Discharge

Reason For Discharge: (G)DEATH BY NOT SUICIDE

Review Of Client's Treatment:

DIM 1: LOC 0.0 Manuel reports his last date of use was on 12/26/19 with meth and marijuana. Manuel states is not experiencing any PAWS symptoms at this time. Manuel reports he calls the UA line daily. No Withdrawal Management Services needed in this dimension.

DIM 2: LOC 0.0 Manuel reports he is working on his medical issues with his PCP. Manuel shared his physician is checking his memory and his medication. Manuel continues to take 600 mg Ibuprofen daily. Manuel reported had an appointment with the dentist on 1/22/20 to get his chipped teeth fixed and it was resolved.

DIM 3: LOC 0.0 Manuel reports has been diagnosed with bipolar type 2, depression, schizoaffective disorder, PTSD, and ADHD. Manuel shares his physician prescribes and monitors his medication. Manuel states he was a client at Greater Lakes Mental Healthcare in Lakewood but now goes to Comprehensive Health once a month. He reported that he is focusing on his upcoming court issues first.

DIM 4: LOC 0.0 Manuel appears to be in pre-contemplation stage of change as evident by his last date of use 12/26/19. Manuel reports he is internally motivated to be in treatment because "I want a better life". Manuel reports he is externally motivated to be in treatment due to legal issues. Manuel needs to explore the pros and cons of substance use which treatment can provide. Discussed and developed ISP. Manuel is to work on his time line of use and mental health incidents.

DIM 5: LOC 0.0 Manuel appears to be at high risk of continued use or relapse due to his last date of use being 12/26/19. Manuel shares he now understands "the wall". Manuel shares that he is attending church and the gym. Discussed with Manuel to attend NA or Celebrate Recovery. Manuel shares he has been attending Fellowship which seems to be working out for him. Reminded Manuel he needs to attend pro-socials 2 times a week and that if he relapses again he will be re-assessed at a higher level of care. Manuel agrees. Manuel states he needs treatment to help him be accountable, structure, and get the education to learn and practice skills necessary to cope with his triggers.

DIM 6: LOC 0.0 Manuel reports he is living in a clean and sober house. Manuel states he is building his sober support network by talking to people in his house and going to church. Manuel reports he is still working on getting approval for SSI. Manuel states his next court date is 03/13/20.

Note Type: Progress note

Review/Discharge Note:

DIM 1: LOC 0.0 Manuel reports his last date of use was on 12/26/19 with meth and marijuana. Manuel states is not experiencing any PAWS symptoms at this time. Manuel reports he calls the UA line daily. No Withdrawal Management Services needed in this dimension.

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Date Created: 03/09/2020 at 04:23 PM PDT
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 03/09/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:
excused

Practitioner: JOHNSON,STACY

Date Of Service: 03/05/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: Cancelled by Client Excused - Group Session (CBCEGS)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 09:00AM

Service Duration: 0

Draft/Final: Final

Electronically Signed by: STACY JOHNSON CDP on 03/09/2020 at 04:23 PM PDT Author

Date Created: 03/05/2020 at 04:35 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 03/04/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:

Recovery Jeopardy and team building. GOALS OF THE GROUP: Client received education and team building skills on the following topics. Substance Abuse, Relapse, Drugs (and alcohol), Triggers, Miscellaneous Today in group we had a recovery jeopardy board game where client were split into two teams and had to come up with knowledge learned while in SUD treatment to answer the recovery question to win as a team. This group excise, supports ASAM Dimension's 1, 2, 3, 4, 5, and 6. Each client was given time to express their thoughts and feelings with their team members when presenting their answer. This group goal was to help clients identify education and team building skills on recovery related topics. Finally the group concluded with a therapeutic discussion on identifying why team building is a skill in recovery and clients discussed what they learned.

*

Manuel was present and on time for group. He reported his last use date as 12/26/2019 for meth. He is not on MAT and no IV use. Manuel appeared to be appropriately dressed and groomed. Individual did not express any issues that would interfere with treatment regarding medical, dental, or emotional issues. Manuel reported that he is feeling good about getting back into church. "I have fun playing recovery games". He reported he will apply what he learned in group today by attending meetings and is waiting for the county to pay his LFO's. This counselor asked why he had not called or submitted his UA for February and he reported he would go take care of it before he left the building today.

Interventions Used:

Counselor provided direct questioning, active listening, support, encouragement and

Date Created: 03/05/2020 at 04:35 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

feedback for positive behavioral change.

Clinical Recommendations:

Individual needs to continue learning skills and tools to be successful out in the community.

Practitioner: JOHNSON,STACY

Date Of Service: 03/03/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: STACY JOHNSON CDP on 03/05/2020 at 04:35 PM PST Author

Date Created: 03/04/2020 at 01:40 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 03/03/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:

Group watched the movie "My Name is Bill W." It is a true story of the founders of Alcoholics Anonymous.

*

Maunel was present and on time for group. He reported his last use date as 12/26/2019 for meth. Manuel is not on MAT and past IV use. Manuel appeared to be appropriately dressed and groomed. Individual did not express any issues that would interfere with treatment regarding medical, dental, or emotional issues.

ISP's were not discussed.

Manuel did not have anything to share after group was finished except he may need to find a sponsor.

Interventions Used:

Counselor provided direct questioning, active listening, support, encouragement and feedback for positive behavioral change, and asked him to leave his phone turned off for future group sessions..

Clinical Recommendations:

Individual needs to continue in group to increase positive emotional responses to situations.

Individual's Response To Session/Treatment: Passively Compliant

Practitioner: JOHNSON,STACY

Date Of Service: 02/25/2020

Date Created: 03/04/2020 at 01:40 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Is This A Transition Of Care?: No

Electronically Signed by: STACY JOHNSON CDP on 03/04/2020 at 01:40 PM PST Author

Date Created: 02/28/2020 at 03:20 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Independent Note
Note Type: Case Management

Notes Field:

Client is in need of transportation to and from scheduled group appointments. This writer requested funds to be added to client's existing Orca card for these appointments. This writer will continue to assist client with transportation needs.

Practitioner: TEGGE,TAMI

Draft/Final: Final

Electronically Signed by: TAMI TEGGE CDPT on 02/28/2020 at 03:20 PM PST Author

Electronically Signed by: SAMI FRENCH CDP, MA on 03/01/2020 at 01:06 PM PST Supervisor

Date Created: 02/28/2020 at 02:16 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: New Service
Note Type: Progress note

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will keep my counselor informed of my progress."

Notes Field:

Manuel is present for his individual counseling session and review of ISP.

DIM 1: LOC 0.0 Manuel reports his last date of use was on 12/26/19 with meth and marijuana. Manuel states is not experiencing any PAWS symptoms at this time. Manuel reports he calls the UA line daily. No Withdrawal Management Services needed in this dimension.

DIM 2: LOC 1.0 Manuel reports he is working on his medical issues with his PCP. Manuel shared his physician is checking his memory and his medication. Manuel continues to take 600 mg Ibuprofen daily. Manuel reported had an appointment with the dentist on 1/22/20 to get his chipped teeth fixed and it was resolved.

DIM 3: LOC 1.0 Manuel reports has been diagnosed with bipolar type 2, depression, schizoaffective disorder, PTSD, and ADHD. Manuel shares his physician prescribes and monitors his medication. Manuel states he was a client at Greater Lakes Mental Healthcare in Lakewood but now goes to Comprehensive Health once a month. He reported that he is focusing on his upcoming court issues first.

Date Created: 02/28/2020 at 02:16 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

DIM 4: LOC 1.0 Manuel appears to be in pre-contemplation stage of change as evident by his last date of use 12/26/19. Manuel reports he is internally motivated to be in treatment because "I want a better life". Manuel reports he is externally motivated to be in treatment due to legal issues. Manuel needs to explore the pros and cons of substance use which treatment can provide. Discussed and developed ISP. Manuel is to work on his time line of use and mental health incidents.

DIM 5: LOC 2.1 Manuel appears to be at high risk of continued use or relapse due to his last date of use being 12/26/19. Manuel shares he now understands "the wall". Manuel shares that he is attending church and the gym. Discussed with Manuel to attend NA or Celebrate Recovery. Manuel shares he has been attending Fellowship which seems to be working out for him. Reminded Manuel he needs to attend pro-socials 2 times a week and that if he relapses again he will be re-assessed at a higher level of care. Manuel agrees. Manuel states he needs treatment to help him be accountable, structure, and get the education to learn and practice skills necessary to cope with his triggers.

DIM 6: LOC 1.0 Manuel reports he is living in a clean and sober house. Manuel states he is building his sober support network by talking to people in his house and going to church. Manuel reports he is still working on getting approval for SSI. Manuel states his next court date is 03/13/20.

Interventions Used:

Counselor provided direct questioning, active listening, support, encouragement and feedback for positive behavioral change.

Clinical Recommendations:

Individual will continue to work on individual service plan, attend sober support meetings, individual counseling session, 2x weekly group sessions, and provide UA/BA samples when requested. Manuel is to remain engaged in recommended mental health treatment. Continue treatment at level of care 1.0, per ASAM recommendations.

Individual's Response To Session/Treatment: Active Participation

Practitioner: JOHNSON,STACY

Date Of Service: 02/28/2020

Date Created: 02/28/2020 at 02:16 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH COUNSELING AND THERAPY (H0004)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 01:15PM - 02:15PM

Service Duration: 60

Draft/Final: Final

Is This A Transition Of Care?: No

Electronically Signed by: STACY JOHNSON CDP on 02/28/2020 at 02:16 PM PST Author

Date Created: 02/28/2020 at 03:07 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 02/28/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:
Excused

Interventions Used:
None

Clinical Recommendations:
None

Individual's Response To Session/Treatment: Other

Other: Absent/Excused

Practitioner: JOHNSON,STACY

Date Of Service: 02/27/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: Cancelled by Client Excused - Group Session (CBCEGS)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 09:00AM

Service Duration: 0

Draft/Final: Final

Date Created: 02/28/2020 at 03:07 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Is This A Transition Of Care?: No

Electronically Signed by: STACY JOHNSON CDP on 02/28/2020 at 03:07 PM PST Author

Date Created: 02/26/2020 at 03:03 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 02/20/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:

Group topic was checking in-very large group, and then an "Alphabet of Stress Management and Coping Skills" was discussed. The group went through the alphabet and added a word to the list which they would use to describe their choice for each letter. A=art, B = balance etc.

*

Individual was present and on time for group. Participated in the group session by sharing and accepting feedback and giving support to others. Individual did not discuss any issues that would interfere with treatment and was focused on the group topic. ISP's were not discussed. He reports his last use date as 12/26/2019 for meth. No MAT, yes IV.

Interventions Used:

Counselor provided direct questioning, active listening, support, encouragement and feedback for positive behavioral change.

Clinical Recommendations:

Individual needs to continue in group to increase positive emotional responses to situations.

Individual's Response To Session/Treatment: Active Participation

Practitioner: JOHNSON,STACY

Date Of Service: 02/20/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)

Date Created: 02/26/2020 at 03:03 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: STACY JOHNSON CDP on 02/26/2020 at 03:03 PM PST Author

Date Created: 02/18/2020 at 11:57 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: New Service
Note Type: Case Management

Notes Field:

Client missed calling in and submitting his UA on 02/13/2020.

Interventions Used:

None

Clinical Recommendations:

None

Individual's Response To Session/Treatment: Passively Compliant

Practitioner: JOHNSON,STACY

Date Of Service: 02/18/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 11:50AM - 11:50AM

Service Duration: 0

Draft/Final: Final

Electronically Signed by: STACY JOHNSON CDP on 02/18/2020 at 11:57 AM PST Author

Date Created: 02/18/2020 at 02:20 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 02/18/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:
Client called/Sick

Interventions Used:
None

Clinical Recommendations:
None

Individual's Response To Session/Treatment: Other

Other: Absent

Practitioner: JOHNSON,STACY

Date Of Service: 02/18/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: Cancelled by Client Excused - Group Session (CBCEGS)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 09:00AM

Service Duration: 0

Draft/Final: Final

Date Created: 02/18/2020 at 02:20 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Is This A Transition Of Care?: No

Electronically Signed by: STACY JOHNSON CDP on 02/18/2020 at 02:20 PM PST Author

Date Created: 02/14/2020 at 03:05 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 02/14/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:

The group watched a movie called A Street Cat named Bob. This movie is based on a true story of a recovering heroin addict James who finds an injured ginger street cat in his new sheltered housing accommodation. James is living hand to mouth just off the streets of London and the last thing he thinks he needs is a pet. Soon, the two are inseparable and slowly transforming their lives and healing the scars of each other's troubled pasts. Manuel shared that after watching the movie's James' family threw him out at New Years Eve, "it reminded me of my 1st relapse. Thought I needed justification to get high".

*

Manuel was present and on time for group. Manuel reported his last use date as 12/26/2019 for "M & M". He is not on MAT and past IV use. Manuel appeared to be appropriately dressed and groomed. Individual did not express any issues that would interfere with treatment regarding medical, dental, or emotional issues. No ISP's were discussed

Interventions Used:

Counselor provided direct questioning, active listening, support, encouragement and feedback for positive behavioral change.

Clinical Recommendations:

Individual needs to continue learning skills and tools to be successful out in the community.

Practitioner: JOHNSON,STACY

Date Of Service: 02/13/2020

Date Created: 02/14/2020 at 03:05 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Is This A Transition Of Care?: No

Electronically Signed by: STACY JOHNSON CDP on 02/14/2020 at 03:05 PM PST Author

Date Created: 02/11/2020 at 02:10 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 02/11/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:

Self-esteem is how you honestly feel about yourself. You express yourself by the way you treat yourself, how well you understand yourself and how you accept feelings. The group will list at least 3 strengths they feel they have and then talk about a situation in how they have demonstrated each strength.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with "M & M". Manuel stated that he is not experiencing any PAWS symptoms. Manuel appeared to be appropriately dressed and groomed. Manuel shared that he is not experiencing any medical, dental, or emotional issues at this time, but that "I want a girlfriend".

Individual's Response To Session/Treatment: Active Participation

Practitioner: JOHNSON,STACY

Date Of Service: 02/11/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Date Created: 02/11/2020 at 02:10 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Is This A Transition Of Care?: No

Electronically Signed by: STACY JOHNSON CDP on 02/11/2020 at 02:10 PM PST Author

Date Created: 02/10/2020 at 08:31 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 02/07/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:

Group topic was working on their own personal timelines. This is a packet of sorts that outlines their lives in age brackets 0-5, 6-10, 11-15, 16-20, 21-25 etc. Important things added to the timelines are births, deaths, marriages, divorces, relationships, abuse, financial, legal, education, health and mental health, hurdles, feelings, emotions and achievements.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and THC. Manuel stated that he is not experiencing any PAWS symptoms. Manuel appeared to be appropriately dressed and groomed. Manuel shared that he is not experiencing any medical, dental, or emotional issues at this time.

Practitioner: JOHNSON,STACY

Date Of Service: 02/06/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Date Created: 02/10/2020 at 08:31 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Electronically Signed by: STACY JOHNSON CDP on 02/10/2020 at 08:31 AM PST Author

Date Created: 02/04/2020 at 01:00 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 02/04/2020

Progress Note For: New Service
Note Type: Process Group

Notes Field:

The group topic was introducing ourselves to each other. Group shared what got them here, their recovery time, the processes they are using to stay sober and what they hoped to get out of being in treatment. Everyone was attentive and respectful.

*

NO SHOW/NO CONTACT

Practitioner: JOHNSON,STACY

Date Of Service: 02/04/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: Cancelled by Client Not Excused - Group Session (CBCNEGS)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:00AM - 09:00AM

Service Duration: 0

Draft/Final: Final

Electronically Signed by: STACY JOHNSON CDP on 02/04/2020 at 01:00 PM PST Author

Date Created: 02/03/2020 at 03:07 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 02/03/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/23/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner: BREMMEYER, TENA KRISTAL

Note Type: Process Group

Notes Field:

It is amazing what you can accomplish when you let go of or at least minimize your time with draining, negative, incompatible and abusive, beliefs, patterns, relationships, friendships and environments. You cannot change people, but you can change the people you are around. Your time is better spent with someone who is not a 'project' or does not need to be saved. Observe the people who are close to you and with whom you spend a lot of time. Which ones uplift and inspire you? Which ones bring you down? Which ones encourage you? Which ones discourage you? Which ones are growing, positive, enthusiastic and supportive? When you leave certain people, do you feel better or feel worse? Which ones always have drama or do not really understand, know or appreciate you? The more you seek quality, respect, growth, peace of mind, love and truth around you the easier it will become for you to decide who sits in the front row and who should be moved to the balcony of your life. This subject supports dimension 4, 5, and 6.

*

Individual was present and on time for group. Participated in the group session by sharing and accepting feedback and giving support to others. Individual no did discuss any issues that would interfere with treatment and was focused on the group topic. ISP's were not discussed. Individual discussed who they would want on the front row and who they need to move to the balcony.

Practitioner: BREMMEYER, TENA KRISTAL

Co-Practitioner: JOHNSON, STACY

Date Created: 02/03/2020 at 03:07 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Date Of Service: 01/23/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: TENA KRISTAL BREMMER CDP on 02/03/2020 at 03:07 PM
PST Author

Date Created: 01/30/2020 at 02:50 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 01/30/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/30/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Notes Field:

Today in group we combined groups with Ms. Kristal Bremmeyer and had our Farewell potluck for AOP counselors Kristal and me. Group was introduced to the two new counselors Bruce Davis and Stacy Johnson who will start on 2/3/20. Group had a rock ceremony for me leaving the AOP Program going to the Assessment Team at PCA. Group was told that Kristal will be with them until 2/10/20 and then she leaves PCA to go to Northwest Integrated. Group participated in rock ceremony for four group members that were completing treatment. Group got to process the changes and successes.

*

Manuel was present for group. Manuel participated in the eating during our Potluck. Manuel appeared to be groomed and dressing appropriately for group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel reported having medical issues of being sore from exercising, dental issues of teeth chipped, and no emotional issues at this time. Manuel wrote down 2 of his feelings; anxious because "of my emotional stress" and love because "of my family." Manuel participated in the rock ceremonies. Manuel stated that he took away from group "Watching others work and stay in recovery give me hope." No ISP's were discussed during this group session.

Individual's Response To Session/Treatment: Actively Engaged

Practitioner: SPENCER,JOAN C

Date Of Service: 01/30/2020

Service Program: AOP (Adult Outpatient) (AOP)

Date Created: 01/30/2020 at 02:50 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/30/2020 at 02:50 PM PST Author

Date Created: 01/28/2020 at 01:17 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Independent Note
Note Type: Case Management

Notes Field:

Manuel failed to call the IVR Line and missed his UA on 1/24/20.

Practitioner: SPENCER,JOAN C

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/28/2020 at 01:17 PM PST Author

Date Created: 01/28/2020 at 04:26 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 01/28/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/28/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I need to learn more about my usage and my mental health by making a time line"

Goals-> "I will know about my usage and my mental health and if there is a connection by doing a time line."

Objectives-> "I will make a time line so I understand if there is a connection between my using and my mental health."

Notes Field:

Group members that needed to shared what was going on and got feedback. Group then worked on the MEE Workbook, Coping Skills. This workbook focuses primarily on dimensions 3 and 5 and secondarily on dimension 6. Group discussed the importance of coping skills for one's ability to maintain their recovery. Group discussed coping skills for accepting feedback, communication, cravings, and stress-reduction. Group members reported which coping skills they thought they needed to work on the most to help them stay in recovery.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel appeared to be appropriately dressed and groomed. Manuel shared with group that he is having problems dealing with his cravings. Manuel was instructed to find a male sponsor in the next 2 days, as well as getting other feedback. Manuel reported that he is experiencing PAWS symptom of cravings and his dental issue to get his teeth fixed on 2/5/20. Manuel reported that the skill that would help him the most is cravings escape skill by "Dealing with my triggers has allowed me to be stressed out, but today's class has alleviated those craving allow me to have a

Date Created: 01/28/2020 at 04:26 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

productive day." Manuel added that he learned today "that not all criticism is negative" and he needs to "utilize my listening skills to better articulate my feeling." Due to group topic we did not discuss Manuel's ISP.

Practitioner: SPENCER,JOAN C

Date Of Service: 01/28/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/28/2020 at 04:26 PM PST Author

Date Created: 01/22/2020 at 02:20 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 01/22/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/09/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner: BREMMEYER, TENA KRISTAL

Note Type: Process Group

Notes Field:

Today in group we went over the MEE Journal Quiet Moments. This journal primarily supports Dimension 3 while secondarily supports Dimension 5. One word is said and then following is the definition of the word. Each client was given space and time to express their thoughts and feelings. This assignment was to help clients think clearly and creatively. We went over serenity, acceptance, love, value, wisdom, forgiveness, laughter, confidence, security, friend, honesty, understanding, imagination, simplicity, patience, balance, freedom, and gratitude. Had clients say which one stood out to them the most of the meditations were complete and how journaling or drawing can be therapeutic.

*

Individual was present and on time for group. Individual did not express any issues that would interfere with treatment regarding medical, dental, or emotional issues. No ISP's were discussed. Combined AOP group. Individual participated in the group activity and actively listened while others were sharing what they got out of their meditations. Individual needs to continue learning skills and tools to be successful out in the community.

Practitioner: BREMMEYER, TENA KRISTAL

Date Of Service: 01/09/2020

Service Program: AOP (Adult Outpatient) (AOP)

Service Charge Code: bh intv,15m,ftf;grp (96153)

Location: PCA-Non-Resid SU Tx Fac

Date Created: 01/22/2020 at 02:20 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: TENA KRISTAL BREMMER CDP on 01/22/2020 at 02:20 PM
PST Author

Date Created: 01/21/2020 at 03:31 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 01/21/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/21/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I need to learn more about my usage and my mental health by making a time line"

Goals-> "I will know about my usage and my mental health and if there is a connection by doing a time line."

Objectives-> "I will make a time line so I understand if there is a connection between my using and my mental health."

Notes Field:

Group did check-in. Group then worked on the MEE Workbook, The Power of Self-talk. This workbook focuses primarily on dimension 3 and secondarily on dimension 5. Group worked on identifying risky self-talk and how to change their thinking. Group discussed and shared when they expected rewards from their using alcohol or drugs and how they could change this with positive self-talk and behaviors.

*

Mauel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel shared with group he is nervous about seeing a girl this afternoon that is coming from Texas. Manuel continued telling group that he even has a stomach pains from the anxiety. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he has medical issues of stomach pain, has dental issues that are getting fixed, and the usual emotional issues besides the stress of meeting up with this particular girl. Manuel shared with group that "I expected to get laid, but could have told myself I don't need to use." Manuel shared another example is "Thought I was gonna get money for staying up all night, but could have gotten a job and stayed sober." Manuel stated he learned he needs to learn how to think and

Date Created: 01/21/2020 at 03:31 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

process his issues properly by his playing "the tape through." Manuel making a time line will be able to see how he believes using is a reward so that he can develop self-talk to prevent him relapsing.

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 01/21/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/21/2020 at 03:31 PM PST Author

Date Created: 01/17/2020 at 03:15 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 01/17/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/16/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Notes Field:

Group began with a group member presenting her 10 most harmful consequences she had when she was drinking. Group member asked questions. Group then worked on the MEE Workbook, The Power of Self-talk. This workbook focuses primarily on dimension 3 and secondarily on dimension 5. Discussed how people react or behave to an event or situation based by their feelings they have from the thought or beliefs of the event or situation. Group practiced and shared their positive self-talk in regards to their recovery by identifying risky self-talk and how to change their thinking.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he is not experiences any PAWS symptoms. Manuel did report experiencing issues due to being put on new medication, has a dental appointment to get his teeth fixed, and has the emotional issues due to women. Manuel appeared to listen to group member presenting and actively asked questions and gave feedback. Manuel shared his situation is he sees an old friend and his risky self-talk is that "no one will know" and "I was horny" giving way to his using. Manuel stated in the same situation he could have told himself "take her to a meeting" and "play the tape through" to could encourage himself to stay in recovery. Manuel stated he learned how to "better deal with thoughts and feelings" and "by using positive affirmations when

Date Created: 01/17/2020 at 03:15 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

dealing with triggers." Due to the group topic we did not discuss Manuel's ISP.

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 01/16/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/17/2020 at 03:15 PM PST Author

Date Created: 01/16/2020 at 12:56 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/16/2020 Start Time: 11:30 AM End Time: 01:00 PM Practitioner:SPENCER,JOAN C
Note Type: Progress note

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will make a list of questions and concerns that I have regarding my medical issues."

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will keep my counselor informed of my progress."

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will discuss my concerns with my physician at my appointment."

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will attend any recommended follow-up appointments."

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Date Created: 01/16/2020 at 12:56 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS, MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will attend my 12/5/19 appointment with my primary care provider."

Notes Field:

Manuel is present at his individual counseling session and review his ISP.

DIM 1: LOC 0.0 Manuel reports his last date of use was on 12/26/19 with meth and marijuana. Manuel states is not experiencing any PAWS symptoms at this time. Manuel reports he calls the UA line daily. No Withdrawal Management Services needed in this dimension.

DIM 2: LOC 1.0 Manuel reports he is working on his medical issues with his PCP. Discussed his ISP. Resolved. Manuel states he went to his reschedule appointment 12/23/19 and follow up appointment on 1/14/20. Manuel has another appointment with his physician on 2/5/20. Manuel reports he took his list of concerns to his physician and reports that his headaches due to the TBI. Manuel shares his physician is checking his memory and his medication. Manuel continues to take 600 mg Ibuprofen daily. Manuel shares that he rescheduled his 12/5/19 appointment to 12/23/19. Manuel reports reports has an appointment with the dentist on 1/22/20 to get his chipped teeth fixed.

DIM 3: LOC 1.0 Manuel reports has been diagnosed with bipolar type 2, depression, schizoaffective disorder, PTSD, and ADHD. Manuel shares his physician prescribes and monitors his medication. Manuel states he is a client at Greater Lakes Mental Healthcare in Lakewood and attends his appointment on Mondays.

DIM 4: LOC 1.0 Manuel appears to be in precontemplation stage of change as evident by his last date of use 12/26/19. Manuel reports he is internally motivated to be in treatment because "I want a better life". Manuel reports he is externally motivated to be in treatment due to legal issues. Manuel needs to explore the pros and cons of substance use which treatment can provide. Discussed and developed ISP. Manuel is to work on his time line of use and mental health incidents.

DIM 5: LOC 2.1 Manuel appears to be at high risk of continued use or relapse due to his last date of use being 12/26/19. Manuel shares he now understands "the wall". Manuel shares that he is attending church and the gym. Discussed with Manuel to attend NA or Celebrate Recovery. Manuel shares he will try Celebrate Recovery for a month and inform counselor his thoughts about the program. Reminded Manuel he needs to attend pro-socials 3 times a week and that if he relapses again he will be re-assessed at a higher level of care. Manuel agrees. Manuel states he needs treatment to help him be accountable, structure, and get the education to learn and practice

Date Created: 01/16/2020 at 12:56 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

skills necessary to cope with his triggers.

DIM 6: LOC 1.0 Manuel reports he is living in a clean and sober house. Manuel states he is building his sober support network by talking to people in his house and going to church. Manuel reports he is still working on getting approval for SSI. Manuel states his next court date is 2/9/20.

*

Strengths: "My resilience"

Needs: "To get my tooth fix"

Abilities: "Playing the drums"

Preferences: "Watching TV"

Interventions Used:

During this session reviewed his information in his Client's Profile and updated his address. We discussed and reviewed Manuel's progress in treatment and updated his dimensions. We then discussed and reviewed his ISP. Resolved. Discussed and developed new ISP to make a time line for his drugs and mental health. Manuel received copy.

Clinical Recommendations:

For Manuel to work on his time line. For Manuel to attend groups on Tuesdays and Thursdays and attend his monthly individual counseling session. For Manuel to attend 3 pro social meetings and bring in written verification. For Manuel to attend his medical and dental appointments. For Manuel to continue to attend his mental health appointments and take his medications as prescribed. Manuel is to continue attending ASAM LOC: 1.0 treatment as he was diagnosed at ASAM LOC: 1.0 in dimensions 2, 3, 4, and 6.

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 01/16/2020

Service Program: AOP (Adult Outpatient) (AOP)

Date Created: 01/16/2020 at 12:56 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Service Charge Code: BH COUNSELING AND THERAPY;IUID (H0004U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 11:30AM - 01:00PM

Service Duration: 90

Draft/Final: Final

Is This A Transition Of Care?: No

Electronically Signed by: JOAN C SPENCER CDP on 01/16/2020 at 12:56 PM PST Author

Date Created: 01/14/2020 at 03:56 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 01/14/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/14/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Notes Field:

Group was informed that their counselor will be transferred to the Assessment Team on 2/3/20. A Group member presented his top 5 things he felt was the most important part of his Relapse Prevention Plan and got group feedback. Another Group member announced that it is his first day of his quitting smoking cigarettes and that his wife quit 4 days ago to be supportive. Group then continued to work on and completed the Life Skills Module: Nuts and Bolts: Decision Making. Group discussed decision making strategies in detail and how it effects their recovery. This group topic focused primarily on dimension 3 and secondarily on dimensions 5 and 6.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he has a sore throat, he is getting his teeth fixed, and emotionally is "all over the place." Manuel participated in the discussion. Manuel stated "If you feel like a relapse is coming, play the tape through and/or analyze the information." Manuel added that he will apply to "make better decision, change who I hang around and surround myself with" about his life. Manuel continued that he will weigh the "pros and cons". Manuel will need to decide that advocating for his health is in his best interest.

Individual's Response To Session/Treatment: Active Participation

Date Created: 01/14/2020 at 03:56 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Practitioner: SPENCER,JOAN C

Date Of Service: 01/14/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/14/2020 at 03:56 PM PST Author

Date Created: 01/13/2020 at 03:42 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 01/10/2020

Progress Note For: Existing Appointment/Service
Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/07/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Notes Field:

Group members continued to work on the Life Skills Module: Nuts and Bolts: Money Management. Group discussed savings and thing that can be cut so they can reduce their expenditures to get to the desired amount they need to, to obtain and not go over income. Group shared creative ways to stretch their income. This group topic focused primarily on dimension 6.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel reported that he is not experiencing any PAWS symptoms at this time. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he is not experiencing any medical or dental issues, but is having "just basic recovery issues that are emotional. Manuel states that he learned "how to better manage my money and how to access finances and save money." Manuel added that he will need to "save my money, maybe start Christmas shopping in the summer." Due to the group topic we did not discuss Manuel's ISP.

Practitioner: SPENCER,JOAN C

Date Of Service: 01/07/2020

Date Created: 01/13/2020 at 03:42 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/13/2020 at 03:42 PM PST Author

Date Created: 01/10/2020 at 12:24 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 01/10/2020

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 01/02/2020 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will make a list of questions and concerns that I have regarding my medical issues."

Notes Field:

Group watched the video Pleasure Unwoven with Dr. Kevin McCauley explaining why addiction is a disease. The video shows how the brain is the organ that becomes defected and the symptoms are poor choices. Dr. McCauley deconstructs the defect of addiction in the pleasure sense by: 1) genetic, 2) rewards, 3) memory, 4) stress and 5) choice sharing that cravings are involuntary and recovery stress reduces defects on the rewards in the mid brain and frontal brain that makes choices. Dr. McCauley stating that addiction is a disease of choice and that causes bad behavior. ISP's were not discussed.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he is not experiencing any medical, dental, or emotional issues at this time. Manuel reported that he is feeling anxious "because of a girl" and happy "because of a girl." Manuel appeared focused watching the video. Manuel was able to share that he learned from the video; "that addiction isn't a choice, it's a disease. We choose to use, therefore, It is a disease of choice." Manuel added he learned about

Date Created: 01/10/2020 at 12:24 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

dopamine, hypothesis, and cross addiction.

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 01/02/2020

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/10/2020 at 12:24 PM PST Author

Date Created: 01/10/2020 at 01:32 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Independent Note
Note Type: Case Management

Notes Field:

Manuel came in to sign a ROI for DSHS and have counselor fill out DSHS form for December.

Practitioner: SPENCER,JOAN C

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 01/10/2020 at 01:32 PM PST Author

Date Created: 12/31/2019 at 03:04 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 12/31/2019

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/31/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner: SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will discuss my concerns with my physician at my appointment."

Notes Field:

oGroup topic was on New Year's and resolutions. This topic focused primarily on dimension 3 and secondarily on dimensions 5 and 6. Group shared how and where one can go to celebrate New Year's in a clean and sober environment. Group discussed the pros and cons of making a New Year's resolution. Group shared if they have done resolutions in the past and if they have one for this year. Group learned the importance that a resolution is to follow the way one plans a goal using the SMART approach.

*

Manuel was present in group. Manuel reported his last date of use was on 12/26/19 with meth and marijuana. Manuel shared that his being around his family and seeing his daughter was stressful and caused his relapse. Manuel stated that he is not experiencing any PAWS symptoms. Manuel appeared to be appropriately dressed and groomed. Manuel shared that he is not experiencing any medical, dental, or emotional issues at this time. Manuel stated that his resolution for this year is to do 100 push up. Manuel learned that he needs to "do it and stick to it." Manuel can use his ISP as also a resolution and work on learning more about TBI's.

Individual's Response To Session/Treatment: Active Participation

Date Created: 12/31/2019 at 03:04 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Practitioner: SPENCER,JOAN C

Date Of Service: 12/31/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 12/31/2019 at 03:04 PM PST Author

Date Created: 12/27/2019 at 01:06 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Independent Note
Note Type: Progress note

Notes Field:

Manuel's sister called stating he relapsed on Christmas Eve and she had to ask him to leave her house. I was not able to give her any information as we have only an emergency RIO. She stated she was calling his attorney and getting a hold of the courts to let them know as well.

Practitioner: BREMMEYER,TENA KRISTAL

Draft/Final: Final

Electronically Signed by: TENA KRISTAL BREMMEYER CDP on 12/27/2019 at 01:06 PM
PST Author

Date Created: 12/27/2019 at 12:41 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Independent Note
Note Type: Peer Note

Notes Field:

Client is in need of transportation to and from scheduled groups, including individual sessions.
Set up funds for January to be added to client's existing Orca card.

Practitioner: TEGGE,TAMI

Draft/Final: Final

Electronically Signed by: TAMI TEGGE CDPT on 12/27/2019 at 12:41 PM PST Author

Electronically Signed by: SAMI FRENCH CDP, MA on 12/27/2019 at 03:40 PM PST Supervisor

Date Created: 12/19/2019 at 02:48 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 12/19/2019

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/19/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Notes Field:

Group had a new member join. Group was reminded what they had seen in the first half of the video THE SHACK. Group then watched the second half of the video. Mack was at The Shack with the 3 strangers learning it was papa, her son, and the spirit. Mack goes through a spiritual journey of learning that forgiveness is letting go that what cripples our love and joy. Mack is able to change his life and bring love back to himself and family. Group appeared focused and emotional watching the video. No ISP's were discussed.

*

Manuel was present in group. Manuel reported his last date of use was on 9/21/19 with meth and marijuana. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he is not experiencing any medical, dental or emotional issues at this time. Manuel reported that his 2 feelings he is feeling are overwhelmed because "of a car accident" and pressured because "I have to go to jail." Manuel reported that he took away from the video "Forgiveness is a part of growth even though things I did in my past might have affected others. I have to first forgive myself in order to move forward in life."

Individual's Response To Session/Treatment: Active Participation

Date Created: 12/19/2019 at 02:48 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Practitioner: SPENCER,JOAN C

Date Of Service: 12/19/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 12/19/2019 at 02:48 PM PST Author

Date Created: 12/17/2019 at 04:03 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 12/17/2019

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/17/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Notes Field:

Group worked in the MEE Workbook Family and Other Relationships. This workbook focused on primarily dimension 6 and secondarily on dimensions 3, 4, and 5. Group first talked about different types of relationships they have. Group discussed the need for trust, caring, being consistent, secure, respect, open, and honesty in having a healthy relationships. Group shared how substance use affects relationships and can create unhealthy families. Group then looked at what it takes to have a healthy family relationships. Group shared an unhealthy relationship they experienced and how it contributed to their substance use and then described one healthy relationship they have experienced and how it helped them have responsible behavior.

*

Manuel was present in group. Manuel reported his last date of use was on 9/21/19 with meth and marijuana. Manuel stated that he is not experiencing any PAWS symptoms. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he is not experiencing any medical, dental or emotional issues at this time. Manuel shared his unhealthy relationship he experienced was "being in a romantic fling were we both used." Manuel stated that his unhealthy relationship did contribute to his using "because it made drugs cheaper and easily assessable." Manuel told group "My past 2 relationships we both used causing conflict and lack of trust, but myself." Manuel continued regarding healthy relationships "You are who you hang around. Both being

Date Created: 12/17/2019 at 04:03 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

sober and having that support allows you to better live and plan." Manuel reported that he learned "using goes hand in hand with unhealthy relationships." Manuel added he needs to wait a year before he starts a relationship. Due to the group topic we did not discuss Manuel's ISP.

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 12/17/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 12/17/2019 at 04:03 PM PST Author

Date Created: 12/13/2019 at 11:00 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/13/2019 Start Time: 09:00 AM End Time: 10:30 AM Practitioner:SPENCER,JOAN C
Note Type: Progress note

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will attend my 12/5/19 appointment with my primary care provider."

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will make a list of questions and concerns that I have regarding my medical issues."

Notes Field:

Manuel is present at his individual counseling session late and review his ISP.

DIM 1: LOC 0.0 Manuel reports his date of last use was on 9/21/19 with meth and marijuana. Manuel reports is not experiencing any PAWS symptoms at this time. No Withdrawal Management Services needed in this dimension. Discussed with Manuel about called the UA line daily and he reports his number has not come up yet.

DIM 2: LOC 1.0 Manuel reports he has a traumatic brain injury which is causing issues headaches. Manuel shares he is taking 600 mg Ibuprofen daily. Discussed his ISP. Manuel shares that he rescheduled his 12/5/19 appointment to 12/23/19. Manuel had forgotten about the list he needs to make to discuss with his physician and will bring it to counselor on Tuesday with doctor's answers. Extended. Manuel states he see his PCP monthly. Manuel reports has a chipped tooth and needs to see a dentist.

DIM 3: LOC 1.0 Manuel reports has been diagnosed with bipolar type 2, depression, schizoaffective disorder, PTSD, and ADHD. Manuel states he is taking medication as

Date Created: 12/13/2019 at 11:00 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

prescribed by his PCP. Manuel is a client at Greater Lakes Mental Healthcare in Lakewood and has appointment on Mondays. Discussed with Manuel his using as possible self-medication.

DIM 4: LOC 1.0 Manuel appears to be in preparation stage of change as evident by his attending treatment, mental health treatment, and sober support meetings. Manuel reports his internal motivation to be in treatment is "to be success and not a burden to myself or family". Manuel reports his external motivation to be in treatment is legal.

DIM 5: LOC 1.0 Manuel appears to be at high risk of continued use or relapse due to his last date of use being 9/21/19 and will be hitting the 3 month mark. Discussed 'the wall'.

Manuel acknowledges that he needs of relapse prevention education to learn and practice skills necessary to cope with his triggers.

DIM 6: LOC 1.0 Manuel reports he is living with his sister and her 5 children. Manuel states that his sister's home is a supportive environment. Manuel shares that he has been attending sober support meetings. Manuel states he is working on getting approval for SSI. Manuel reports has legal issues and his next court date is 1/9/20. Manuel agrees he needs treatment to keep him accountable and give him structure and support .

*

Strengths: "My willing to be sober"

Needs: "I need honesty"

Abilities: "Talking with people"

Preferences: "Television"

Interventions Used:

During this session we discussed and reviewed Manuel's progress in treatment and updated his dimensions. We then discussed and reviewed his ISP. Extended.

Clinical Recommendations:

For Manuel to write his list of concerns he has about his medical conditions, discuss with his physician and attend appointment. For Manuel to attend groups on Tuesdays and Thursdays and attend his monthly individual counseling session. For Manuel to attend 2 pro social meetings and bring in written verification. For Manuel to continue to attend his mental health appointments and take his medications as prescribed. Manuel is to continue attending ASAM LOC: 1.0 treatment as he was diagnosed at ASAM LOC: 1.0 in dimensions 2, 3, 4, 5, and 6.

Date Created: 12/13/2019 at 11:00 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 12/13/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH COUNSELING AND THERAPY;IUID (H0004U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:45AM - 11:00AM

Service Duration: 75

Draft/Final: Final

Is This A Transition Of Care?: No

Electronically Signed by: JOAN C SPENCER CDP on 12/13/2019 at 11:00 AM PST Author

Date Created: 12/12/2019 at 02:46 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 12/12/2019

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/12/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will keep my counselor informed of my progress."

Notes Field:

Group continued to work on Relapse Prevention - 37 Ideas on Staying Sober During the Holidays. This discussion primarily focused on dimension five, while it secondarily covered dimensions three and six. Group was reminded again that recovery is a one-day-at-a-time endeavor, no matter what time of year it is. Group reviewed Sober Holidays Tips #1 1 through #16 and then discussed Sober Holiday Tips #17 through #37. Group shared the Tip that would help them the most and why.

*

Manuel was present in group. Manuel reported his last date of use was on 9/21/19 with meth and marijuana. Manuel reported that he is not experiencing any PAWS symptoms. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he is not experiencing any medical, dental, or emotional issues at this time. Manuel shared that Tip #35 Be sure there is plenty of light in you life. Manuel explained that "I tend to watch a lot of television". He shared that he needs to be "programing myself to be more gregarious and outgoing" which he acknowledge may be the "key to my recovery." Due to the group topic we did not discuss Manuel's ISP.

Individual's Response To Session/Treatment: Active Participation

Date Created: 12/12/2019 at 02:46 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Practitioner: SPENCER,JOAN C

Date Of Service: 12/12/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 12/12/2019 at 02:46 PM PST Author

Date Created: 12/10/2019 at 03:27 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 12/10/2019

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/10/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will attend any recommended follow-up appointments."

Notes Field:

Relapse Prevention Elective- HOLIDAYS AND RECOVERY - 37 Ideas on Staying Sober During the Holidays. This discussion primarily focused on dimension five, while it secondarily covered dimensions three and six. Group was reminded that recovery is a one-day-at-a-time endeavor, no matter the season and at this time of year it can be an especially trying time to stay healthy and sober. Group completed a handout to assess their possible relapse risk during the holidays. Group then discussed Sober Holiday Tips #1 through # 16. Group shared the Tip of the ones we went over that would help them the most.

*

Manuel was present in group late. Manuel reported his last date of use was on 9/21/19 with meth and marijuana. Manuel reported that he is not experiencing any PAWS symptoms. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he is not experiencing any medical, dental, or emotional issues at this time, but then shared with group that he is having short term memory loss that maybe due to his head injury or his using marijuana. Manuel shared that Tip #12 don't romance the drink or drug is the one that would help him the most. Manuel reported that he learned "ideas on how to stay sober during the holidays." Manuel added that he

Date Created: 12/10/2019 at 03:27 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

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will apply what he learned "by allowing myself to be less vulnerable to my triggers and apply a few steps to my every day life." Due to the group topic we did not discuss Manuel's ISP.

Practitioner: SPENCER,JOAN C

Date Of Service: 12/10/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:30AM - 11:15AM

Service Duration: 105

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 12/10/2019 at 03:27 PM PST Author

Date Created: 12/06/2019 at 11:05 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 12/06/2019

Progress Note For: Existing Appointment/Service
Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/05/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will attend my 12/5/19 appointment with my primary care provider."

Notes Field:

Relapse Prevention 4- WORK AND RECOVERY This group topic primarily focused on dimension 5 and 6. Group discussed the importance of working, but how it can affect their recovery. It was emphasized the importance of balancing their work and still stay focused on recovery. Group discussed how jobs can make treatment difficult and ways to deal with keeping recovery the first priority. Group then discussed the first 6 months to 1 year not to make major changes whenever possible, whether it's jobs or relationships, so that the change of being in recovery will be less stressful. Group talked about work situations where recovery can be more difficult and may need to change positions. Group went over the problems of having free time being unemployed and looking for employment. Reviewed with Group how to cope with looking for employment, the need for key words in resumes, the importance of cover letters, and networking. Group members that take care of their children were recognized as having important job and their need to keep recovery a priority.

*

Manuel was present in group. Manuel reported his last date of use was on 9/21/19 with meth and marijuana. Manuel stated that he is having PAWS symptom of cravings. Manuel appeared to be appropriately dressed and groomed. Manuel reported that he

Date Created: 12/06/2019 at 11:05 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

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has no medical, dental, or emotional issues at this time. Manuel openly shared in group discussion as well as advise on finding employment. Manuel reported that he learned from today's topic "Relapse prevention, working has let to many addicts to relapse. Having a plan to deal with those situations help." Manuel continued he will "Get a sponsor and possibly attend more meetings." Due to group topic we did not discuss Manuel's ISP.

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 12/05/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 12/06/2019 at 11:05 AM PST Author

Date Created: 12/04/2019 at 02:23 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 12/04/2019

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 12/03/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Notes Field:

Group completed the MEE Workbook, Self-worth. This workbook focuses primarily on dimension 3 and secondarily on dimensions 2, 4, and 5. Reviewed what Group had done yesterday. Group then talked about the importance of activities, sleep, and nutrition. Group shared what they saw when they look in the mirror when they were using, what they see now when they look in the mirror, and 3 things they do better to take care of themselves. Group discussed the importance of setting realistic expectations and not magical or low expectations. Group talked about taking time reaching each step and appreciating ones progress. Group was taught the importance of having tangible small steps that are clear and reasonable. Group shared a goal they have, the steps to reach goal, what they need to achieve the goal and time frame.

*

NO SHOW/NO CONTACT

Practitioner: SPENCER,JOAN C

Date Of Service: 12/03/2019

Service Program: AOP (Adult Outpatient) (AOP)

Service Charge Code: Cancelled by Client Not Excused - Group Session (CBCNEGS)

Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:00AM - 09:00AM

Service Duration: 0

Date Created: 12/04/2019 at 02:23 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 12/04/2019 at 02:23 PM PST Author

Date Created: 11/27/2019 at 05:21 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: New Service
Note Type: Peer Note

Notes Field:

Client is in need of transportation to and from scheduled groups, including individual sessions.

Set up funds for December beginning 12/3/19 with new Orca card being sent here to Pierce County Alliance.

Practitioner: TEGGE,TAMI

Date Of Service: 11/27/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: Recovery Coach-Individual Svcs (RC200I)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 03:15PM - 03:30PM

Service Duration: 15

Draft/Final: Final

Electronically Signed by: TAMI TEGGE CDPT on 11/27/2019 at 05:21 PM PST Author

Electronically Signed by: SAMI FRENCH CDP, MA on 11/27/2019 at 05:54 PM PST Supervisor

Date Created: 11/26/2019 at 04:10 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 11/26/2019

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 11/26/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will discuss my concerns with my physician at my appointment."

Notes Field:

Group watched the first part of the documentary Unguarded. The documentary was on basketball player, Chris Herren. This part of the documentary shows how he was an outstanding basketball player in high school, but was using alcohol and marijuana with his friends. He began cocaine in College and was dismissed for using, but then was given another chance at Fresno State. During his time at Fresno, he was found using and went to rehab. Chris was picked up by Colorado Nuggets, who monitored him during the time he was with them. Chris got traded to the Boston Celtics and that was when he began to use Oxycodone. Chris was released from the Celtics after having an injury. Chris started playing basketball in Italy when he began using heroin because he had no problem finding it and would have had a problem obtaining Oxycodone. Group discussed how Chris functioned while using and his hiding his use. Group was combined with Ms. Kristal Bremmeyer's group.

*

Manuel was present in group late. Manuel reported his last date of use was on 9/21/19 with meth and marijuana. Manuel appeared to be appropriately dressed and groomed. Manuel shared that he has PTSD, ADHD, bipolar, and depression, but no medical or dental issues at this time. Manuel was able to share 2 feelings of being anxious due to

Date Created: 11/26/2019 at 04:10 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

"I don't know where to go next" and feeling depressed due to "I can't see my kids". Manuel appeared to be focused watching the documentary. Manuel shared that he took away from the documentary so far was "That drugs are bad and depression is not handled with street drugs. Marijuana is a gateway drug. Allowing drugs to hinder your growth was my ultimate downfall." Due to the group topic we did not discuss Manuel's ISP.

Practitioner: SPENCER,JOAN C

Date Of Service: 11/26/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: BH INTV,15M,FTF;GROUP;IUID (96153U5)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:30AM - 11:15AM

Service Duration: 105

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 11/26/2019 at 04:10 PM PST Author

Date Created: 11/21/2019 at 01:23 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Thursday Joan AM] (166)
Group Documentation Date: 11/21/2019

Progress Note For: Existing Appointment/Service
Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 11/21/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Select ISP Version: Individual Service Plan

Note Addresses Which Individual Service Plan Problem:

Problems-> "I recently had a traumatic brain injury and the doctor hasn't told me anything about it."

Goals-> "To get the help I need to get better and advocate for my health."

Objectives-> "to think better and feel better."

Interventions-> "I will make a list of questions and concerns that I have regarding my medical issues."

Notes Field:

Group completed the Life Skills: How to Put Your Best Foot Forward. The topic primarily focused on dimension 3 and 6. Group members reviewed what was discussed yesterday. Group then was reminded of the use of "I" statements. Group talked about ways to express themselves to communicate successfully to others on various topics. Group talked about job interviews and went over interview tips on things to do and things not to do. Group shared questions they have been asked on interviews and how they answered to make their interview successful.

*

Manuel was present in his first group. Manuel introduced himself to group. Manuel reported that his last date of use was on 9/21/19 with meth and marijuana. Manuel reported that he is not experiencing any PAWS symptoms at this time. Manuel was appropriately dressed and groomed. Manuel received his UA code # 43600 today. Manuel reported that he has medical, dental, and emotional issues due to his being beaten by 3 people when they thought he was robbing KFC. Manuel was able to explain why one acts a certain way to get hired since he has been in management position and has been the one doing the interviewing. Manuel reported that he learned "don't pass

Date Created: 11/21/2019 at 01:23 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

judgement or use "you" statements. Due to the group topic we did not discuss Manuel's ISP.

Individual's Response To Session/Treatment: Active Participation

Practitioner: SPENCER,JOAN C

Date Of Service: 11/21/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: bh intv,15m,ftf;grp (96153)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 11:15AM

Service Duration: 135

Draft/Final: Final

Electronically Signed by: JOAN C SPENCER CDP on 11/21/2019 at 01:23 PM PST Author

Date Created: 11/19/2019 at 01:43 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Group Name or Number: [AOP Tuesday Joan AM] (164)
Group Documentation Date: 11/19/2019

Progress Note For: Existing Appointment/Service
Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date: 11/19/2019 Start Time: 09:00 AM End Time: 11:15 AM Practitioner:SPENCER,JOAN C
Note Type: Process Group

Notes Field:

Group completed the MEE Workbook Prescription Drugs. This workbook focused primarily on dimension 2 and secondarily on dimension 5. Reviewed what was discussed in yesterday's Group session done in this workbook. Group then learned the effect opioids and depressants has on the body's brain and circulatory, respiratory, and digestive systems. Groups talked about stimulants that are commonly prescribed and short and long term effects. Group discussed how drugs can dangerously interact with one another, especially with alcohol. Group was then asked their experience with prescription drugs.

*

NO SHOW/NO CONTACT

Practitioner: SPENCER,JOAN C

Date Of Service: 11/19/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: Cancelled by Client Not Excused - Group Session (CBCNEGS)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):
1. 09:00AM - 09:00AM

Service Duration: 0

Draft/Final: Final

Date Created: 11/19/2019 at 01:43 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Electronically Signed by: JOAN C SPENCER CDP on 11/19/2019 at 01:43 PM PST Author

Date Created: 11/15/2019 at 08:30 AM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Independent Note
Note Type: Case Management

Notes Field:

ROI and assessment summary faxed to Dept of Assigned Council - Dee Sontag - at
253-798-6715 at the client's request. Fax confirmation received ok.

Practitioner: VANHORN,LAURA

Draft/Final: Final

Electronically Signed by: LAURA VANHORN CDPT on 11/15/2019 at 08:30 AM PST Author

Electronically Signed by: SAMI FRENCH CDP, MA on 11/15/2019 at 08:38 AM PST Supervisor

Date Created: 11/14/2019 at 12:40 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Individual Progress Notes

Progress Note For: Existing Appointment/Service

Note Addresses Which Existing Service/Appointment: Site: Pierce County Alliance Date:

11/14/2019 Start Time: 09:20 AM End Time: 12:00 PM Practitioner: VANHORN, LAURA

Note Type: Admission

Notes Field:

S: driven

N: ORCA card

A: playing drums and piano

P: mental health and outpatient

Client is a 33-year-old single heterosexual African American male seeking treatment for substance use issues. He reports recent arrest and pending Robbery 2 charges out of Pierce County Superior Court but states that he has not been directed to have an SUD assessment as of yet.

DIM 1: LOC 0 Client reports last use of methamphetamine and cannabis as occurring on 9/22/19. He reports that he was incarcerated from 9/22/19 until 10/30/19 and denies any substance use since his release. Client reports history of mild withdrawal symptoms for cannabis as irritability and sweats. No signs of intoxication or withdrawal were observed; no symptoms reported. No services needed in this dimension.

DIM 2: LOC 2.1 Client reports recent assault resulting in a traumatic brain injury which is currently causing headaches, memory issues, and difficulty concentrating. He describes sustaining this injury, as well as a chipped tooth, as a direct result of mental health and substance use issues. Client reports current medication of Seroquel which he has been prescribed and taking for the past two weeks to treat bipolar disorder type 2 and schizoaffective disorder. Client reports that medication is moderately effective but makes him "feel foggy." Client is currently under the care of a physician. Biomedical issues are stable and able to be addressed concurrently in an outpatient setting. He is in need of motivating strategies to encourage him to address his medical issues as well as education on self-care and nutrition.

DIM 3: LOC 2.1 Client reports diagnoses of bipolar type 2, depression, schizoaffective

Date Created: 11/14/2019 at 12:40 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

disorder, PTSD, and ADHD. He states that he has taken medications in the past but struggled to stay compliant to due substance use but that he has been taking Seroquel as prescribed for the past two weeks. He describes the medication as mildly effective aeb his statement, "I still hear voices, but they are quieter." He reports that he started hearing voices in early adulthood. Client reports substance use including methamphetamine and cannabis exacerbate his mental heal issues and that a recent five-day binge on methamphetamine led to a "full psychosis" which resulted in him being assaulted and later arrested. He is unable to recall details of this event. He reports PTSD due to being sexually assaulted by an older cousin when he was 7-years-old, as well as being shot in the leg in 2015 due to "being in the wrong place at the wrong time." Client reports that he recently reengaged in mental health counseling at Greater Lakes and verbalizes a desire to participate in counseling as well as further investigate psychiatric medication management. Client is assessed as being at mild risk of endangering self and others due to recent assault and arrest, and diagnosed mental health issues require LOC 2.1 monitoring to minimize distractions from treatment and recovery.

DIM 4: LOC 1.0 Client reports a history of legal issues related to substance use, the most recent of which was a 9/22/19 arrest resulting in pending Robbery 2 charge at which time client was under the influence which he states exacerbated his existing mental health issues. He reports a history of multiple treatment attempts, the most recent of which was successful completion of inpatient at Sea Mar which client reports was motivated by internal desire to change. Client reports internal and external motivation to seek treatment and change his use, to address legal issues as well as to improve overall mental health. Client expresses willingness to participate in treatment planning and to attend all scheduled activities, including mental health treatment and sober support meetings, both of which he states that he is already engaged in. Client is in need of scheduled contact and motivational strategies to address potential ambivalence and strengthen motivation.

DIM 5: LOC 1.0 Client report that he has been using methamphetamine regularly since age 24, peak use of 0.5 grams per day via smoke, five years ago at age 28. He reports that since this time he has been clean "on an off" with his longest period of sobriety being one year, and his most recent being 90 days from June 2019 until September 2019 when he relapsed for 5 days. Client's last use date is 9/22/19. He reports that he primarily struggles with internal triggers related to mental health issues and coping with trauma and negative emotions. He reports history of daily cannabis use, using up

Date Created: 11/14/2019 at 12:40 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

1 to 2 grams a day. Client reports using cannabis to address cravings for methamphetamine. His last use date is 9/22/19. Client appears to have good insight to his personal triggers and is in need of relapse prevention education to learn and practice skills necessary to cope with his triggers.

DIM 6: LOC 1.0 Client reports that he has been staying with his sister since his release from jail on 9/22/19 and that prior to this he had his own apartment which he lost due to his arrest and incarceration. He reports that his sister's house is a supportive environment and that she has a zero tolerance policy for any substance use. He states that he has been attending "1 or 2" sober support meetings per week and has friends in recovery. Client is in need of the accountability and support provided in LOC 1.0 while he addresses his pending legal issues and strengthens his sober support system.

Interventions Used:

This counselor used motivational interviewing skills to perform a full bio-psychosocial assessment in order to assess the client's need for treatment services.

Clinical Recommendations:

Client is recommended to enter into and complete ASAM LOC 1.0 Outpatient treatment services, with the understanding that client will be concurrently addressing mental health issues at Greater Lakes and MH counselor has recommended that he meet with her weekly. Client has agreed to attend 9AM group sessions on Tuesdays and Thursdays starting 11/19/19.

Individual's Response To Session/Treatment: Actively Engaged

Practitioner: VANHORN,LAURA

Date Of Service: 11/14/2019

Service Program: AOP (Adult Outpatient) (AOP)
Service Charge Code: AOD assessment (H0001)
Location: PCA-Non-Resid SU Tx Fac

Start/End Time(s):

1. 09:45AM - 12:30PM

Date Created: 11/14/2019 at 12:40 PM PST
Form Name: Individual/Group Note
Client's Name: ELLIS,MANUEL (000003520)
Client's DOB: [REDACTED]

Pierce County Alliance
Tacoma, Washington

Session Start Time: 09:45 AM

Session End Time: 12:30 PM

Select Time Entry: 1

Service Duration: 165

Draft/Final: Final

Electronically Signed by: LAURA VANHORN CDPT on 11/14/2019 at 12:40 PM PST Author

Electronically Signed by: SAMI FRENCH CDP, MA on 11/14/2019 at 01:55 PM PST Supervisor

Specimen Information

Donor Name: MANUEL E ELLIS

DOB: [REDACTED]

Specimen ID: 159194478

Reference #: AKB1417FF

Requested By:

Agency: Pierce County Alliance

Sub-Agency: Pierce County Alliance - AOP

Test Reason:

Type (Matrix): Urine

Collected By:

Collected: 11/14/2019 09:37 AM

Received: 11/14/2019 05:07 PM

Reported: 11/15/2019 12:05 PM

External ID: AKB1417FF

Patient ID: s2148444

MEDICATIONS:

Additional Information

Collected By: Pierce County Alliance - PCA Collector

Generic

Specimen Final Outcome - Screen and Confirmation Results

Test	Result	Outcome	Method	Cutoff	Notes
AMPHETAMINES					
Amphetamine 500 Screen		NEGATIVE	EIA	500 ng/mL	
BARBITURATES					
Barbiturates Screen		NEGATIVE	EIA	200 ng/mL	
BENZODIAZEPINES					
Benzodiazepines Screen		NEGATIVE	EIA	200 ng/mL	
BUPRENORPHINE					
Buprenorphine Screen		NEGATIVE	EIA	5 ng/mL	
FENTANYL					
Fentanyl Screen		NEGATIVE	EIA	2 ng/mL	
METHADONE					
Methadone Metabolite		NEGATIVE	EIA	300 ng/mL	
OPIATES					
Opiates Screen		NEGATIVE	EIA	300 ng/mL	
OXYCODONE					
Oxycodone Screen		NEGATIVE	EIA	100 ng/mL	
CANNABINOIDS (THC)					
Cannabinoids Screen	-	NEGATIVE	EIA	20 ng/mL	
COCAINE					
Cocaine Screen		NEGATIVE	EIA	300 ng/mL	
ECSTASY (MDMA)					
MDMA Screen		NEGATIVE	EIA	500 ng/mL	
ETG/ETS					
Ethyl glucuronide Screen		NEGATIVE	EIA	500 ng/mL	
6-ACETYLMORPHINE (HEROIN)					
6-Acetylmorphine Screen		NEGATIVE	EIA	10 ng/mL	
PHENCYCLIDINE					
Phencyclidine Screen		NEGATIVE	EIA	25 ng/mL	

Validity Testing

Test	Result	Outcome	Method	Cutoff	Notes
Creatinine	54.7 mg/dL	NORMAL	Colorimetric	>= 20 mg/dL	
pH	6.9	NORMAL	Colorimetric	4.5 - 8.9	
Nitrite	0 mcg/mL	NORMAL	Colorimetric	500 mcg/mL	

Additional Comments

Testing performed at Cordant Health Solutions - Tacoma Lab, 2617 E L St Ste A, Tacoma, WA 98421, CLIA # 50D0891660

Donor Name: MANUEL E ELLIS

Reference #: AKB1417FF

Specimen ID:

159194478

Report ID: 91208348

FINAL REPORT

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Specimen Information

Donor Name: MANUEL E ELLIS

DOB: [REDACTED]

Specimen ID: 159194478

Reference #: AKB1417FF

Requested By:

Agency: Pierce County Alliance

Sub-Agency: Pierce County Alliance - AOP

Test Reason:

Type (Matrix): Urine

Collected By:

Collected: 11/14/2019 09:37 AM

Received: 11/14/2019 05:07 PM

Reported: 11/15/2019 12:05 PM

External ID: AKB1417FF

Patient ID: s2148444

MEDICATIONS:

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Irene Shu, Ph.D., DABCC (CC,TC), F-ABFT

*** END OF REPORT ***

Specimen Information

Donor Name: MANUEL E ELLIS
DOB: [REDACTED]
Specimen ID: 159255625
Reference #: AKB222F50
Requested By:

Agency: Pierce County Alliance
Sub-Agency: Pierce County Alliance - AOP

Test Reason:
Type (Matrix): Urine
Collected By:
Collected: 11/22/2019 03:54 PM
Received: 11/25/2019 05:04 PM
Reported: 11/25/2019 06:07 PM
External ID: AKB222F50
Patient ID: s2148444

MEDICATIONS:

Additional Information

Collected By: Pierce County Alliance - PCA Collector
Generic

Specimen Final Outcome - Screen and Confirmation Results

Test	Result	Outcome	Method	Cutoff	Notes
AMPHETAMINES					
Amphetamine 500 Screen		NEGATIVE	EIA	500 ng/mL	
BARBITURATES					
Barbiturates Screen		NEGATIVE	EIA	200 ng/mL	
BENZODIAZEPINES					
Benzodiazepines Screen		NEGATIVE	EIA	200 ng/mL	
BUPRENORPHINE					
Buprenorphine Screen		NEGATIVE	EIA	5 ng/mL	
FENTANYL					
Fentanyl Screen		NEGATIVE	EIA	2 ng/mL	
METHADONE					
Methadone Metabolite		NEGATIVE	EIA	300 ng/mL	
OPIATES					
Opiates Screen		NEGATIVE	EIA	300 ng/mL	
OXYCODONE					
Oxycodone Screen		NEGATIVE	EIA	100 ng/mL	
CANNABINOIDS (THC)					
Cannabinoids Screen	-	NEGATIVE	EIA	20 ng/mL	
COCAINE					
Cocaine Screen		NEGATIVE	EIA	300 ng/mL	
ECSTASY (MDMA)					
MDMA Screen		NEGATIVE	EIA	500 ng/mL	
ETG/ETS					
Ethyl glucuronide Screen		NEGATIVE	EIA	500 ng/mL	
6-ACETYLMORPHINE (HEROIN)					
6-Acetylmorphine Screen		NEGATIVE	EIA	10 ng/mL	
PHENCYCLIDINE					
Phencyclidine Screen		NEGATIVE	EIA	25 ng/mL	

Validity Testing

Test	Result	Outcome	Method	Cutoff	Notes
Creatinine	101.8 mg/dL	NORMAL	Colorimetric	>= 20 mg/dL	
pH	7.3	NORMAL	Colorimetric	4.5 - 8.9	
Nitrite	0 mcg/mL	NORMAL	Colorimetric	500 mcg/mL	

Additional Comments

Testing performed at Cordant Health Solutions - Tacoma Lab, 2617 E L St Ste A, Tacoma, WA 98421, CLIA # 50D0891660

Donor Name: MANUEL E ELLIS

Reference #: AKB222F50

Specimen ID:

159255625

Report ID: 91761761

FINAL REPORT

Page 1 of 2

WAAG0022528

Specimen Information

Donor Name: MANUEL E ELLIS

DOB: [REDACTED]

Specimen ID: 159255625

Reference #: AKB222F50

Requested By:

Agency: Pierce County Alliance

Sub-Agency: Pierce County Alliance - AOP

Test Reason:

Type (Matrix): Urine

Collected By:

Collected: 11/22/2019 03:54 PM

Received: 11/25/2019 05:04 PM

Reported: 11/25/2019 06:07 PM

External ID: AKB222F50

Patient ID: s2148444

MEDICATIONS:

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Irene Shu, Ph.D., DABCC (CC,TC), F-ABFT

*** END OF REPORT ***

Specimen Information

Donor Name: MANUEL E ELLIS

DOB: [REDACTED]

Specimen ID: 159377152

Reference #: AKC17192B

Requested By:

Agency: Pierce County Alliance

Sub-Agency: Pierce County Alliance - AOP

Test Reason:

Type (Matrix): Urine

Collected By:

Collected: 12/17/2019 10:13 AM

Received: 12/17/2019 04:21 PM

Reported: 12/18/2019 12:25 PM

External ID: AKC17192B

Patient ID: s2148444

MEDICATIONS:

Additional Information

Collected By: Pierce County Alliance - PCA Collector
Generic

Specimen Final Outcome - Screen and Confirmation Results

Test	Result	Outcome	Method	Cutoff	Notes
AMPHETAMINES					
Amphetamine 500 Screen		NEGATIVE	EIA	500 ng/mL	
BARBITURATES					
Barbiturates Screen		NEGATIVE	EIA	200 ng/mL	
BENZODIAZEPINES					
Benzodiazepines Screen		NEGATIVE	EIA	200 ng/mL	
BUPRENORPHINE					
Buprenorphine Screen		NEGATIVE	EIA	5 ng/mL	
FENTANYL					
Fentanyl Screen		NEGATIVE	EIA	2 ng/mL	
METHADONE					
Methadone Metabolite		NEGATIVE	EIA	300 ng/mL	
OPIATES					
Opiates Screen		NEGATIVE	EIA	300 ng/mL	
OXYCODONE					
Oxycodone Screen		NEGATIVE	EIA	100 ng/mL	
CANNABINOIDS (THC)					
Cannabinoids Screen	-	NEGATIVE	EIA	20 ng/mL	
COCAINE					
Cocaine Screen		NEGATIVE	EIA	300 ng/mL	
ECSTASY (MDMA)					
MDMA Screen		NEGATIVE	EIA	500 ng/mL	
ETG/ETS					
Ethyl glucuronide Screen		NEGATIVE	EIA	500 ng/mL	
6-ACETYLMORPHINE (HEROIN)					
6-Acetylmorphine Screen		NEGATIVE	EIA	10 ng/mL	
PHENCYCLIDINE					
Phencyclidine Screen		NEGATIVE	EIA	25 ng/mL	

Validity Testing

Test	Result	Outcome	Method	Cutoff	Notes
Creatinine	116.7 mg/dL	NORMAL	Colorimetric	>= 20 mg/dL	
pH	6.8	NORMAL	Colorimetric	4.5 - 8.9	
Nitrite	2 mcg/mL	NORMAL	Colorimetric	500 mcg/mL	

Additional Comments

Testing performed at Cordant Health Solutions - Tacoma Lab, 2617 E L St Ste A, Tacoma, WA 98421, CLIA # 50D0891660

Specimen Information

Donor Name: MANUEL E ELLIS

DOB: [REDACTED]

Specimen ID: 159377152

Reference #: AKC17192B

Requested By:

Agency: Pierce County Alliance

Sub-Agency: Pierce County Alliance - AOP

Test Reason:

Type (Matrix): Urine

Collected By:

Collected: 12/17/2019 10:13 AM

Received: 12/17/2019 04:21 PM

Reported: 12/18/2019 12:25 PM


External ID: AKC17192B

Patient ID: s2148444

MEDICATIONS:

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Irene Shu, Ph.D., DABCC (CC,TC), F-ABFT

*** END OF REPORT ***